

~~JOINT EXPLANATORY STATEMENT OF THE COMMITTEE OF~~
~~CONFERENCE~~

DIVISION G – LABOR, HEALTH AND HUMAN SERVICES, AND
EDUCATION, AND RELATED AGENCIES APPROPRIATIONS 2003

follow ~~be guided by~~ the language and instructions set forth in ~~an~~ explanatory statement ~~the~~
of the Managers in the Senate accompanying H.J.Res. 2 that appears in the
Congressional Record of January 15, 2003. With respect to the provisions
in the Senate explanatory statement that specifically address the allocation of
funds, each has been reviewed by the conferees and those that are jointly
concurred have been endorsed in this joint statement.

In the cases where the Senate explanatory statement requests a report,
the conferees are agreed that departments and agencies have up to 90 days
beyond the due date specified in the Senate explanatory statement to submit
the report.

The conferees are aware of several instances during the past year
where the Departments funded in the Labor, Health and Human Services,
Education and Related Agencies Appropriations Act have failed to consult
with, or timely notify, the House and Senate Appropriations Committees
about significant budgetary actions and the reorganization of departmental

offices, programs, and activities. Moreover, some Departments have become too lax in responding to the requests for information or reports from the Committees. The conferees believe that timely, accurate and complete ~~is~~ information ~~are~~ critical in order for the Appropriations Committees to meet their oversight responsibilities. The conferees fully expect that the Departments funded in this bill will be more responsive to the Committees in this regard.

Therefore, the conferees concur with language included in the explanatory statement of the Senate regarding reprogramming and the initiation of new programs. The conferees direct that the Departments and agencies funded through this Division make a written request to the chairmen of the Committees prior to the reprogramming of funds in excess of 10 percent, or \$500,000, whichever is less, between programs, activities, or elements unless an alternate amount for the agency in question is specified elsewhere in ~~Division 6~~ of this statement. The conferees further agree that a reprogramming request is required for actions involving less than the above-mentioned amounts if such actions would have the effect of changing an agency's funding requirements in future years or if the action can be construed to be the initiation of a new program.

Second, the conferees reiterate that the Committees be notified regarding reorganization of offices, programs, or activities *prior* to the planned implementation of such reorganizations.

Third, the conferees request that each Department institute a tracking system for reports requested by the Committees in order to ensure their timely submission.

this Finally, the conferees concur with language in the explanatory statement of the Senate that statements on the effect of ⁷Division ~~9~~ of this appropriation Act be submitted to the Committees within 60 days of enactment of this Act. *1.c.*

The Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 2003, put in place by this resolution, incorporates the following agreements of the managers:

TITLE I---DEPARTMENT OF LABOR

EMPLOYMENT AND TRAINING ADMINISTRATION

Training and Employment Services

The conference agreement includes \$5, ²218,070,000 for training and employment services instead of \$5,138,513,000 as proposed by H.R. 246 and \$5,120,084,000 as proposed by the Senate. Of the amount appropriated,

\$2,463,000,000 is an advance appropriation for fiscal year 2004, as proposed by the Senate.

H.R. 246 and ↗
The conference agreement includes \$1,000,965,000 for Youth

Training, which is the Senate level. Funding for the Youth Opportunity Grants, \$44,500,000, provided within the total for this activity in H.R. 246, is provided separately in the conference agreement as proposed by the Senate. These grants are aimed at increasing the long-term employment of youth who live in empowerment zones, enterprise communities, and other high-poverty areas.

The conference agreement includes \$1,463,770,000 for the Dislocated Worker program instead of \$1,484,500,000 as proposed by H.R. 246 and \$1,383,040,000 as proposed by the Senate. The conferees override the formula that provides that 80 percent of the funds provided will be used for State formula grants and 20 percent for National Emergency Grants, providing \$1,157,162,000 for the States and \$306,608,000 for the National Reserve. Within the National Reserve, the conference agreement includes \$30,000,000 to fund National Emergency Grants authorized in the Trade Act of 2002 to support State administration of health insurance tax credits for eligible participants.

The conference agreement includes \$56,000,000 for Native Americans instead of \$55,000,000 as proposed by H.R. 246 and \$57,000,000 as proposed by the Senate.

The conference agreement includes \$77,836,000 for activities authorized under Section 167 of the Workforce Investment Act, reflected in two separate line items on the table accompanying the Conference Report: 'Migrant and Seasonal Farmworkers' and 'National Activities/Other'.

Under the Migrant and Seasonal Farmworkers line item, the agreement provides \$77,326,000. The conference agreement includes bill language directing that \$4,640,000 of this amount be used for migrant and seasonal farmworker housing grants. This agreement also provides that the remaining amount be used for State service area grants, including funding grantees in those States impacted by formula reductions at no less than eighty-five percent of the comparable 1998 levels for such States. Within the National Activities/Other line item, the Conference agreement includes \$510,000 to be used for Section 167 training, technical assistance and related activities, including continuing funding for migrant rest center activities at the current level.

The conference agreement includes \$1,518,550,000 for Job Corps. Within the total, \$1,391,000,000 is provided for continuing operations of the

program and \$127,550,000 is for renovation and construction of Job Corps centers. The conferees are pleased with the prompt attention given by the Department to developing the selection process for new Job Corps centers. The conferees intend that the Department shall give priority to communities in major metropolitan areas that demonstrate strong linkages with local school systems, post-secondary education systems, employers, faith-based and community organizations and child care facilities. In an effort to maximize the U.S. taxpayer's investment in Federal programs, priority should also be given to sites that incorporate co-location models that may include Job Corps along with programs such as Head Start and State or local community colleges and vocational technical schools. Additionally, priority should be given to sites that have high numbers of at-risk youth and currently export the majority of their State's eligible students to Job Corps centers in other States and regions.

The conferees are aware of the controversy over the accuracy of financial reporting under the Workforce Investment Act, and intend to carefully monitor the spending situation, recognizing the vital role of the workforce system at a time of economic slowdown.

With respect to the projects listed below for pilots and demonstrations, the conferees encourage the Department to ensure that these

projects are coordinated with local Workforce Investment Boards. The conferees also encourage the Department to ensure that project performance is adequately documented and evaluated. The conference agreement includes the following amounts for the following projects and activities:

ABCD Devorris Center for Business Development	\$250,000
Advanced Electronics Technology Education Project in Alabama to educate the workforce for the 21st century high tech economy	500,000
Alaska's People (Division of Cook Inlet Tribal Council) to train 245 Anchorage-area low-income Natives for construction, repair jobs, including gaining required certifications	100,000
Alcorn State University in Mississippi for training programs in support of the development of minority high-tech businesses	900,000
American Indian Science and Engineering Society for the Rural Computer Utilization Training Program	100,000
Automated Nursery Project in Mississippi	1,000,000
Bay Area Community Health Partnership in Green Bay, Wisconsin for nurse training programs	650,000
Bay Area Vidio Coalition, San Francisco, CA, to develop on-line, interactive training for low income individuals.	300,000
Bethel Community Facility, Chicago Heights, IL, for development of job training initiative with at-risk, homeless population	125,000
Bishops Museum	400,000
Bismarck State College in Bismarck, North Dakota, to provide training and continuing education related to electric power plant technologies and operations	400,000
Center for Career and Employment Training, Bala Cynwyd, PA, to train urban, minority workers for entry-level management positions	200,000
Central Iowa Employment & Training Consortium for a resource center for disabled and disadvantaged individuals	800,000
Central PA Workforce Development Corporation	125,000
Chattanooga State Technical Community College, Tennessee, for Tennessee Valley Workforce Aging Management Program initiative	500,000
Chester County Department of Community Development/The Reinvestment Fund, PA	250,000
Chicago Southland Alliance, Chicago Heights, IL, to recruit and train health care professionals	250,000
City of Peoria, Illinois, for training to unemployed and underemployed individuals in biosciences workforce development	100,000
Clark County, NV for training programs designed to move youth into higher paying construction jobs	250,000
Clark State Community College, Springfield, Ohio, for Integrated Systems Technologists Maintenance Training Program	200,000
Cleveland State University, Cleveland, Ohio, for Ohio Center for the Advancement of Women in Public Service	100,000

Coastal Enterprises, Inc., Wiscasset, ME, for training low income rural populations	100,000
Collegiate Consortium for Workforce and Economic Development (formerly Shipyard College) Philadelphia, PA., for workforce development and training in the Philadelphia region	250,000
Community Economic Empowerment Corporation, Louisville, Kentucky for employment training programs	40,000
Community Empowerment Association, Inc., Pittsburgh, PA., for data bank development for jobs needed in the construction trade, health care, services and manufacturing industries	100,000
Community Loan Fund of Southwestern Pennsylvania, Pittsburgh, PA., to expand the "Family Wage Job Initiative," which will provide resources and create family wage jobs in nine Southwestern PA counties	200,000
Contra Costa Community College District, Walnut Creek, CA, for Regional Training Institute	275,000
Delta Center for Career and Workforce Education for workforce training for adults in the Mississippi Delta	1,000,000
Des Moines Area Community College to create a Career Technology Center	250,000
Essex County College, Newark, NJ, for the Technical Training Project	70,000
Everett Community College, Everett, WA, for the Radiology Technology Program	200,000
Family Service League of Suffolk County, Inc., Bay Shore, NY, for Work Plus	100,000
Federation of Southern Cooperatives, for education and training of low-income farmers and their families	500,000
First Alaskans Foundation in conjunction with Alaska Works program continuation to train Alaska Natives as petroleum industry workers	500,000
Flathead Valley Community College in Kalispell, Montana for the development of occupational and vocational programs	700,000
Goodwill Industries of Southeast Wisconsin for a job training program for disadvantaged adults in construction and other positions	100,000
Henderson Community College in Kentucky for adult educational and training programs	100,000
High Tech Training - Maui, Hawaii	300,000
Homies, Initiating New Communities, Los Angeles, CA, to replicate job training program for at-risk youth	100,000
Human Services Agency, County of Ventura, California, for a Skill Training Program for Welfare recipients	100,000
Institute for Advanced Learning and Research for curriculum development and equipment to help develop and innovative high tech workforce in Southside, Virginia	100,000
International Brotherhood of Electrical Workers L.U. 363 and Hudson Valley N.E.C.A. Regional Training Facility, Harriman, NY, for 21st Century training	100,000
Intertribal Bison Cooperative in Rapid City, SD to provide employment training	100,000
Kankakee Community College, Kankakee, Illinois, for Integrated Systems Technology Pilot program to train individuals to maintain high-tech industrial equipment found in manufacturing facilities	500,000
Kingston-Newburgh Enterprise Community, Newburgh, NY, to train at-risk youth and expand nurse mentoring program	400,000
Lehigh Valley Workforce Investment Board, INC. for integrated regional training and employment curriculum for skilled workers to assist the manufacturing industry in the Lehigh Valley	100,000

Louisville Central Community Center, Inc., Louisville, Kentucky, for job readiness training and job placement program for adults who are underemployed	15,000
Maine Manufacturing Extension Partnership to provide training to the manufacturing workforce in the region	750,000
Martin Luther King, Jr., Business Empowerment Center, Worcester, MA, for job training for minority workers	100,000
Mat-Su School District Vocational training for youth in Mat-Su Valley	150,000
Maui Economic Development Board for the Rural Computer Utilization Training Program	300,000
MECA United Cerebral Palsey, Erie, PA., to establish a job training program for disabled persons	50,000
Michigan Technology Commercialization Cooperation, Dexter, Michigan, for the implementation of a program that facilitate the creation of new companies and jobs	500,000
Military Educational Training Enhancement Fund, Carville, Louisiana, for a job challenge program for at risk youth	300,000
Milwaukee Area Technical College to implement the new manufacturing skill standards and develop a companion assessment and certification system	250,000
Minot State University, Minot, North Dakota, for the Minot Job Corps Fellowship Training Program	400,000
Mississippi State University, for the Center for Advance Vehicular Systems to develop workforce training systems	950,000
Mott Community College, Flint, MI, for complementation of the Mott Workforce Development Institute for Manufacturing Simulation	830,000
Muhlenberg Resource Center, Muhlenberg College, Allentown, PA., for programs to overcome language barriers, improve workplace ethics and career development	100,000
National Student Partnerships, Washington, DC, for National Service Program training activities	400,000
Nevada Women's Fund in Reno, Nevada for a comprehensive study on the status of women and girls in Nevada to tailor workforce initiatives	50,000
North Central Wisconsin Workforce Development Board to establish simulated clinical and laboratory facilities to provide training to nurses and technicians	400,000
North Central Workforce Investment Board, Ridgway, Pennsylvania	200,000
Oklahoma University Cancer Center	150,000
Opportunity Inc., Highland Park, Illinois, for a job training opportunities	375,000
Opportunity, Inc. in Highland Park, IL to implement a model job training program to integrate workers with disabilities into a manufacturing workplace	25,000
Patrick County Education Foundation, Stuart, VA, for workforce development project for rural communities	282,000
Pennsylvania Assosiation for Individuals with Disabilities, Johnstown, PA, for development of job opportunities for persons with disabilities	150,000
Pennsylvania Women Work, Pittsburgh, Pennsylvania, for job training and employment services to single parents, displaced homemakers and low-income heads of household	100,000
Petersburg/Newburg Improvement Association, Louisville, Kentucky, for employment training programs	15,000
Philadelphia Opportunities Industrialization Center, Inc., PA	200,000
Pine Street Inn in Boston, MA to provide job skills training to the homeless	125,000
Pittsburgh Life Sciences Greenhouse, PA for job training programs related to growing biotech industry	100,000

Potential Reentry Opportunities in Business and Education (PROBE), Lebanon, PA., for job training in nontraditional jobs or occupational training for dislocated workers and single parents	50,000
Pride Industries, Roseville, CA, to create long-terms jobs for persons with disabilities and other barriers to employment	600,000
Project Amiga, South El Monte, CA, for the TeleVillage Program	250,000
Puget Sound Center for Teaching, Learning and Technology, Bothell, WA, for Future-Ready Workforce Project	250,000
Rebuild, Inc., Canton, Ohio for workforce development	250,000
Remote Rural Hawaii Job Training Project	1,500,000
Residential Care Consortium, Easton, PA., for job placement & training for young adults who are aging out of residential placements	100,000
Safer Foundation, Harvey, IL, for the Workplace Acclimation Program for Ex-Offenders.	225,000
Samoan/Asian Pacific Job Training, Hawaii Community Foundation	500,000
San Diego Workforce Partnership, San Diego, California, for planning and evaluation, and to develop a curriculum for the Pacific Center	175,000
South Carolina Manufacturing Extension Partnership, Columbia, South Carolina, to train workers on the principles of lean manufacturing	166,000
Southeast Missouri State University, Cape Girardeau, Missouri, for economic and workforce development	500,000
Springfield Technical Center in Springfield, VT for job training activities	300,000
St. Stephen Lifestyle Enrichment Center in Kentucky for adult education and job training programs	250,000
State of Mississippi Automotive Workforce Training Program	2,500,000
Telacu Education Foundation in Los Angeles for a Community-Based Nursing Careers Program	900,000
The Joblinks program	500,000
Thunderbird Trades Academy, Oklahoma City, Oklahoma	100,000
Training & Education Opportunities at the University of Hawaii at Maui	1,800,000
Umpqua Community College E-Commerce Training Center, Roseburg, Oregon, to provide job training	50,000
United Mine Workers of America, Fairfax, Va., for UMWA Career Centers, Inc.,	1,000,000
University of Akron, Ohio, for Medina Campus to establish a workforce development/vocational rehabilitation project to meet the needs of the region's work force	1,500,000
University of Alaska-Anchorage Center for Human Development for training of health care personnel	400,000
University of Idaho Alternative Careers	900,000
University of Mississippi to support real time captioning efforts for court reporting school	500,000
University of Northern Iowa Immigration Services for Iowa's Communities	375,000
University Technology Park (Chester) for the administration of a Computer and Internet Training Center to train working poor and youth in high-tech skills	75,000
Urban League of Metropolitan Denver, Denver, CO, for Project Connect Technical Training Program	150,000
Valley Economic Development Center, Van Nuys, CA, for the Pacoima Workforce Development Initiative to train low-income inner-city and minority families	250,000
Valley Initiative for Development and Advancement, Weslaco, TX, for Community Based Workforce Demonstration Project	350,000

Valley Packaging Industries, Inc. in Appleton, Wisconsin to provide job training and support for homeless shelter residents and non-English speaking workers	83,000
Vermilion Community College, Ely, MN, for development of a Professional Forest Harvester program	500,000
Vietnam Veterans Leadership Program of Western Pennsylvania, Pittsburgh, PA, for the Jobs for Veterans Project	250,000
W. J. Usery Center, Atlanta, Georgia, for training and technical assistance seminars	100,000
Washington State University, Pullman, Washington, for training and recruitment	50,000
West Virginia High Technology Consortium Foundation, Fairmont, West Virginia, for the Collaborative Information Technology Training Program	700,000
Western Wisconsin Workforce Development Boards, Inc. in La Crosse, Wisconsin to provide customized training for Certified Nurse Practitioners and Licensed Practical Nurses	150,000
Westside Industrial Retention and Expansion Network, Cleveland, Ohio, for continuation of projects	500,000
William F. Goodling Regional Advanced Skills Center to train dislocated workers in the manufacturing industry	200,000
Workforce Initiative Association, Canton, Ohio, for the Business Services Unit Demo project	500,000
Wrightco Technologies, Inc., PA	250,000
Young Community Developers, Inc., San Francisco, CA, to train low income residents as environmental remediation specialists	350,000
Youth Opportunities in Retailing, Inc. to work in cooperation with schools and community organizations to teach sales and service skills to develop a future workforce.	200,000

Community Service Employment for Older Americans

The conference agreement appropriates \$445,200,000 for Community Service Employment for Older Americans, instead of \$440,200,000 as proposed H.R. 246 and the Senate.

Program Administration

The conference agreement appropriates \$175,652,000 for Program Administration, instead of \$172,061,000 as proposed by H.R. 246 and \$177,642,000 as proposed by the Senate. The detailed table at the end of

this joint statement reflects the activity distribution agreed to by the conferees.

Employment Standards Administration

Salaries and Expenses

The conference agreement appropriates \$383,607,000 for the Employment Standards Administration, salaries and expenses, instead of \$380,757,000 as proposed by H.R. 246 and \$385,457,000 as proposed by the Senate. The detailed table at the end of this joint statement reflects the activity distribution agreed to by the conferees.

Special Benefits (Including Transfer of Funds)

The conference agreement includes \$37,657,000 to be made available to the Secretary from the fair share entities to pay the costs of administration of the Federal Employees' Compensation Act instead of \$36,986,000 as proposed by H.R. 246. Within that total the conference agreement includes \$12,027,000 for medical bill review and periodic roll management as proposed by the Senate instead of \$11,356,000 as proposed by H.R. 246.

Black Lung Disability Trust Fund (Including Transfer of Funds)

The conference agreement includes \$31,987,000 to be transferred to the Employment Standards Administration, \$22,952,000 to be transferred to Departmental Management Salaries and Expenses, and \$334,000 to be

transferred to Departmental Management Office of the Inspector General as proposed by the Senate rather than \$34,151,000, \$24,033,000, and \$345,000, respectively, as proposed by H.R. 246.

Occupational Safety and Health Administration

Salaries and Expenses

The conference agreement includes \$453,256,000 for the Occupational Safety and Health Administration instead of \$444,194,000 as proposed by H.R. 246 and \$462,314,000 as proposed by the Senate. The detailed table at the end of this joint statement reflects the activity distribution agreed to by the conferees.

Within the total, \$3,200,000 is to be used to extend funding for Institutional Competency training grants provided that the grantee has demonstrated satisfactory performance.

The conference agreement does not include the \$2,000,000 set-aside as proposed in the Senate bill pertaining to the re-issuance of an ergonomics standard.

The conferees understand that the Department has had a proposed reorganization of certain field offices in Maine under consideration for several months. However, the Department did not formally advise the Committees on Appropriations until February 10, 2003 regarding this

proposal. The conferees do not consider this to be timely notification. Therefore, the conferees direct that the Department maintain the current organization of Maine field offices until the Congress has had sufficient time to review this proposal.

Mine Safety and Health Administration

Salaries and Expenses

The conference agreement includes \$274,741,000 for the Mine Safety and Health Administration instead of \$254,323,000 as proposed by H.R. 246 and \$271,841,000 as proposed by the Senate. The detailed table at the end of this joint statement reflects the activity distribution agreed to by the conferees.

Within the total, the conference agreement includes \$2,000,000 to be available for mine rescue and recovery activities on a non-contingency basis as proposed by the Senate. The conference agreement also includes \$10,000,000 to be available until expended for digitizing mine maps and for developing technology related to such activities as proposed by the Senate.

The conferees agree with the Senate explanatory statement included in the Congressional Record of January 15, 2003 pertaining to the National Academy of Sciences report on coal waste impoundments, except that the

due date for the required study is changed from March 15, 2003 to August 15, 2003.

The conferees have included \$3,000,000 for an award to the National Technology Transfer Center for a coal-slurry impoundment pilot project in Southern West Virginia.

Bureau of Labor Statistics

Salaries and Expenses

The conference agreement includes \$495,454,000 for the Bureau of Labor Statistics rather than \$498,164,000 as provided by H.R. 246 and \$497,054,000 by the Senate. The detailed table at the end of this joint statement reflects the activity distribution agreed to by the conferees.

The conference agreement includes language that changes the period of availability for Occupational Employment Statistics funding from a program year basis to a fiscal year basis as proposed by the Senate. Within the total for the Employment and Unemployment Statistics activity, \$5,000,000 is for the Mass Layoff Statistics program. Similar language was included in the Senate bill.

Office of Disability Employment Policy

Salaries and Expenses

The conference agreement includes \$47,465,000 for the Office of Disability Employment Policy instead of \$42,500,000 as proposed by H.R. 246 and \$47,015,000 as proposed by the Senate.

Departmental Management

Salaries and Expenses

The conference agreement includes \$390,379,000 for Departmental Management, salaries and expenses, instead of \$294,413,000 as proposed by H.R. 246 and \$396,623,000 as proposed by the Senate. The detailed table at the end of this joint statement reflects the activity distribution agreed to by the conferees.

The conference agreement includes \$33,893,000 for administration and management rather than \$32,670,000 as proposed by H.R. 246 and \$30,191,000 as proposed by the Senate. Funds provided above the budget request for this activity may be used for the Departmental management crosscut.

The conference agreement does not include the \$3,000,000 set-aside for the creation of an Office of Pension Participant Advocacy as proposed by the Senate.

The conference agreement includes \$148,015,000 for the Bureau of International Labor Affairs (ILAB), instead of \$54,574,000 as provided by H.R. 246. Within the total provided, \$82,000,000 is to assist developing countries with the elimination of child labor. Of this amount, \$45,000,000 is for the International Labor Organization's International Programme for the Elimination of Child Labor. In addition, \$37,000,000 is provided for bilateral assistance, made available through September 30, 2004, to improve access to basic education in international areas with a high rate of abusive and exploitative child labor. The conference agreement further includes \$20,000,000 for multilateral technical assistance and \$17,000,000 for bilateral technical assistance. These funds help developing countries implement core labor standards, strengthen the capacities of Ministries of Labor to enforce national labor laws, and protect internationally-recognized worker rights. The conference agreement includes \$5,000,000 for ILAB to build its own permanent capacity to monitor and report regularly and in-depth to the Congress on the extent to which foreign countries with trade and investment agreements with the United States respect internationally-recognized worker rights and effectively promote core labor standards. The conference agreement also includes \$10,000,000 for global

workplace-based HIV-AIDS education and prevention programs and \$14,015,000 for Federal administration and other ILAB programs.

On June 18, 2002, the Department of Justice published final regulations regarding Executive Order 13166 pertaining to limited English proficiency. The conferees are concerned about the potential costs of implementation to the Department of Labor, State agencies, local workforce investment boards, and other grant recipients. Therefore, the Department should prepare a report by August 15, 2003 for the Committees on Appropriations which outlines implementation of the new policy guidance as interpreted by the Department including enforcement policies and costs to the Department and all affected entities, including State labor departments or agencies. In addition, the conferees request that the report also include what assistance the Department will offer to assist grant recipients in complying with the revised policy guidance.

Veterans Employment and Training

The conference agreement appropriates \$214,212,000 for Veterans Employment and Training, instead of \$210,337,000 as proposed by H.R. 246 and \$218,087,000 as proposed by the Senate. The detailed table at the end

of this joint statement reflects the activity distribution agreed to by the conferees.

GENERAL PROVISIONS

EXECUTIVE ORDER 13126

The conference agreement includes a provision proposed by the Senate that none of the funds appropriated in this Act shall be obligated or expended for the procurement of goods produced by forced or indentured child labor. H.R. 246 contained no similar provision.

DENALI COMMISSION

The conference agreement includes a provision proposed by the Senate that authorizes to be appropriated such sums as may be necessary to the Denali Commission to conduct job training where Denali Commission projects will be constructed. H.R. 246 contained no similar provision.

~~SOCIAL SECURITY DIVIDED RETIREMENT SYSTEM~~

~~The conference agreement includes a provision proposed by the Senate to extend the Social Security divided retirement system authority to the State of Kentucky. H.R. 246 contained no similar provision.~~

SOCIAL SECURITY DIVIDED RETIREMENT SYSTEM

The conference agreement does not include a provision proposed by the Senate to extend the Social Security divided retirement system authority to the State of Kentucky. H.R. 246 did not contain this provision.

TITLE II -- DEPARTMENT OF HEALTH AND HUMAN SERVICES

HEALTH RESOURCES AND SERVICES ADMINISTRATION

Health Resources and Services

The conference agreement includes \$6,497,630,000 for health resources and services, of which \$6,472,630,000 is provided as budget authority and \$25,000,000 is made available from the Public Health Service policy evaluation set-aside, instead of \$5,885,497,000 as proposed by H.R. 246 and \$6,280,681,000 as proposed by the Senate.

The conference agreement includes bill language identifying \$40,000,000 for the rural hospital flexibility grants program instead of the \$30,000,000 in H.R. ~~236~~ and \$45,000,000 in the Senate bill. Within the total provided, \$15,000,000 is for the Small Rural Hospital Improvement Grant program.

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The conference agreement includes bill language identifying \$298,153,000 for the construction and renovation of health care and other facilities, including the purchase of equipment. The Senate and H.R. 246 contained no similar provision. These funds are to be used for the following projects:

A.O. Fox Memorial Hospital, Oneonta, New York	\$500,000
Access to Care Initiative, Luray, Virginia	400,000
Achievement Centers for Children, Cuyahoga County, Ohio	500,000
Adolescent Residential Center for Help (ARCH) in Anchorage, AK	1,500,000
Advocates for a Healthy Community, Missouri	150,000
Aging and Health Services Center	200,000
Alderson-Broadus College in West Virginia	500,000
All Children's Hospital Pediatric Clinical Research Center, St. Petersburg, Florida	1,033,000
Allegheny-Clarion Valley Development Corp., PA	100,000
Alliance Community Hospital, for Endovascular surgery	600,000
Allied Services of Scranton, Allentown, PA	100,000
Alpha Community Ambulance Service, Inc., State College, Pennsylvania	100,000
Area 1 Agency on Aging, Del Norte County, California	100,000
Arkansas State University at Mountain Home	1,100,000
Atchison County Resource Center, Maryville, Missouri	300,000
Atlantic City Behavioral Health Center, Atlantic City, New Jersey	500,000
Aultman Health Foundation, Canton, Ohio	1,000,000
Aurora University, Aurora, Illinois, to establish an Institute for Collaboration in Education and Health Services	10,000,000
Ballarmine Health Science Center at the Bellarmine University, Louisville, Kentucky	800,000
Baptist Health Systems, Baptist Shelby Obstetrical Services Expansion Project, Alabaster, Alabama	500,000
Baptist Orange Hospital, Orange, Texas	350,000
Barnes-Kasson County Hospital, Susquehanna, Pennsylvania, for a magnetic resonance imaging unit and digital radiology equipment	850,000
Barnwell County Government, Barnwell, South Carolina, for new Health Services facility	166,000
Barry University Institute for Community Health and Minority Medicine, Miami Shores, Florida	700,000
Beaverton Health Clinic, Beaverton, Oregon	50,000
Benedictine Hospital, Kingston, New York	350,000
Benson Hospital, Benson, Arizona	500,000
Bertie County Rural Health Association, Winsor, North Carolina	500,000
Bethune Cookman College in Florida	900,000

Bowdle Healthcare Center in Bowdle, SD for technology and equipment	100,000
Boys Town Research Hospital, Lied Learning and Technology Center for Childhood Deafness and Vision Disorders in Omaha, Nebraska	1,000,000
Boys Village Youth and Family Services, Milford, Connecticut	400,000
Boys' Village, Inc., Smithville, Ohio, for Health and Wellness Center for middle and high school youth by keeping them from dropping out, teen pregnancy, targeting drug and alcohol abuse, and treating violent youths	500,000
Bradford Regional Medical Center, Bradford, Pennsylvania, for medical equipment	100,000
Brazos Valley Family Medicine Center, Bryan, Texas	250,000
Brownsville Community Health Center, Brownsville, Texas	300,000
Bucktail Medical Center, Renova, Pennsylvania, for medical equipment	100,000
Burlington School District, Vermont	100,000
Butler Hospital, Providence, Rhode Island	300,000
Camillus House, Miami, Florida	500,000
Cancer Research Center of Hawaii, Honolulu, Hawaii	500,000
Carol G. Simon Cancer Center, Florham Park, New Jersey	250,000
Carondelet St. Mary's Hospital, Tucson, Arizona	600,000
Catholic Health Systems, Buffalo, New York, for Our Lady of Victory Neighborhood	500,000
Catskill Regional Medical Center, Harris, New York	350,000
Center for Families and Children, Cleveland, Ohio	300,000
Charles Cole Memorial Hospital, Coudersport, Pennsylvania, for medical equipment	100,000
Children's Home of Wheeling, Inc. in Wheeling, West Virginia	150,000
Children's Hospital and Regional Medical Center, Seattle, Washington	300,000
Children's Hospital Central California for construction of the Pediatric Trauma Unit, Los Angeles, CA	150,000
Children's Hospital of San Diego, San Diego, California	475,000
Children's Medical Center of Dayton, Dayton, OH	543,000
Children's Memorial Hospital and Children's Memorial Institute for Education and Research, Chicago, Illinois	650,000
Children's National Medical Center, Washington, D.C.	300,000
Chippewa Valley Technical College, Eau Claire, Wisconsin	500,000
Christopher Rural Health Planning Corporation, Christopher, Illinois, for Mt. Vernon Community Health Center	380,000
Cincinnati Children's Hospital Medical Center, Cincinnati, Ohio	794,000
City of Abilene, Texas	650,000
City of Austin, South Austin Public Health and Neighborhood Center, Austin, Texas	500,000
City of El Paso, Texas	350,000
City of Glendale, California, for the Edison-Pacific Community Medical Clinic	100,000
Clark County, NV Health District for a public health laboratory	338,000
Clearfield Hospital, Clearfield, Pennsylvania, for medical equipment	100,000
Clearwater Valley Hospital and Clinics	500,000
Cleveland Clinic Foundation, Cleveland, Ohio, for a Heart center	1,000,000
Cleveland Clinic Foundation, Cleveland, Ohio, for a Men's Minority Health Center	1,000,000
Cold Spring Harbor Laboratory in New York for a Women's Cancer Genomics Center	500,000
Colorado State University	500,000
Columbia Memorial Hospital, Hudson, New York	825,000

Columbus Children's Hospital, Children's Research Institute (CRS), Columbus, Ohio, to purchase equipment	921,000
Columbus Community Hospital Foundation, Columbus, Wisconsin	650,000
Commonwealth of Virginia, Division of Consolidated Laboratories	250,000
Community clinics initiative of Cook Children's Medical Center, Ft. Worth, Texas	600,000
Community Health Center of Franklin County, Turners Falls, Massachusetts	225,000
Community Health Centers in Iowa	501,000
Community Health Centers of Pinellas, Inc., St. Petersburg, Florida	500,000
Community Health Connections Family Health Center, Fitchburg, Massachusetts	300,000
Community Medical Center Healthcare System, Scranton, Pennsylvania	800,000
Coulee Community Hospital, Grand Coulee, Washington	700,000
County Commission of Raleigh County, West Virginia	4,000,000
County of San Mateo, California	650,000
Coushatta Tribe of Louisiana, Jefferson Davis Parish, Louisiana for a tribal wellness center	1,000,000
Creighton University Health Sciences Complex, Omaha, Nebraska	500,000
Crouse Health Foundation, Inc., Syracuse, New York	475,000
Cumberland Medical Center, Crossville, Tennessee	500,000
Denver Health and Trauma Center to continue this mission and update the hospital for use as the designated bioterrorism response center, Denver, Colorado	1,500,000
Department of Pediatrics, Milton S. Hershey Medical Center, Hershey, Pennsylvania	250,000
Department of Public Health, Redding, California, for a new Public Health Laboratory	500,000
Detroit Medical Center, Hutzel Hospital, Detroit, Michigan	800,000
Detroit Medical Center, Rehabilitation Institute of Michigan	450,000
Dixie County Health Department, Cross City, Florida	130,000
Dominican University of California, San Rafael, California	200,000
Driscoll Children's Hospital, for its Driscoll Pediatric Clinic in McAllen, Texas	2,000,000
Dunlap Memorial Hospital, Wayne County, Ohio, for equipment	750,000
DuPage County Mental Health Center, Wheaton, Illinois	500,000
East Jefferson General Hospital, Metairie, Louisiana	300,000
East Tennessee State University James H Quillen College of Medicine, Johnson City, Tennessee	200,000
Eastern Virginia Medical School, Norfolk, Virginia	500,000
Edward Hospital, Naperville, Illinois	100,000
Eisenhower Medical Center, Rancho Mirage, California	500,000
Eisner Pediatric and Family Medical Center to expand its facilities to provide urgently needed care to low-income children and families.	150,000
Englewood Hospital and Medical Center, Englewood, New Jersey	200,000
Erlanger Health System, Chattanooga, Tennessee, for purchase of mobile carts with wireless laptop, wall-mounted computers, wireless antennas network attached servers and wireless hardware and software infrastructure	825,000
Euclid Hospital Emergency Department, Euclid, Ohio	500,000
Eunice Kennedy Shriver Center at UMass Medical School, Waltham, Massachusetts	150,000
Evans Memorial Hospital, Claxton, Georgia	50,000
Fairfield Medical Center Children's Daycare Facility, Lancaster, Ohio	350,000
Family Christian Health Center, Harvey, Illinois	225,000
Family Health Center of Boone County, Missouri	100,000

Family Health Centers of San Diego, San Diego, California	300,000
First Choice Community Clinic, Albuquerque, New Mexico	2,300,000
FirstHealth of the Carolinas, Inc., Pinehurst, North Carolina, subsidization and staff	490,000
Florida Blood Services, Inc., St. Petersburg, Florida, for equipment and construction costs	135,000
Florida Emergency Medicine Foundation, Orange County, Florida	500,000
Fontbonne University Center for Communication Disorders, Deaf Education and Special Education Training for planning and design, Missouri	1,000,000
Fox Chase Cancer Center and The University of Maryland Greenebaum Cancer Center for the American Russian Cancer Alliance to establish a long term collaborative program for research, clinical activities and education that will reduce the morbidity and mort	600,000
Freeport Family Health Center, Freeport, Ohio	150,000
Friendship House Association of American Indians, San Francisco, California	250,000
Fulton County Department of Health and Wellness, Atlanta, Georgia	350,000
Georgia State University, Atlanta, Georgia	400,000
Gifford Medical Center, Randolph, Vermont	295,000
Gilda's Club of Northern New Jersey, Hackensack, New Jersey	250,000
Glens Falls Hospital, Glen Falls, New York	950,000
Glide Memorial Foundation, San Francisco, California	250,000
Good Shepherd, Lehigh County, PA	500,000
Grandview Hospital and Medical Center, Dayton, Ohio	500,000
Greater Rockingham Area Services, Bellows Falls, Vermont	40,000
Griffin Home, Friends of Youth, Renton, Washington	200,000
Grinnell Regional Medical Center Indigent Care Clinic	100,000
Grossmont College, El Cajon, California	200,000
Grover G. Dils Medical Center, Caliente, Nevada	500,000
Guthrie Corning Hospital, Corning, New York	500,000
H. Lee Moffit Cancer Center, Tower Project, Florida	600,000
Hackensack University Medical Center, Hackensack, New Jersey	150,000
Hamilton Community Health Network, Flint, Michigan	200,000
HARBOR Branch Oceanographic Institution, Fort Pierce, Florida, for equipment	500,000
Harlem Hospital Center, New York City	400,000
Hartland Regional Community Foundation, St. Joseph, Missouri, for emPower Plant program	200,000
Harts Health Clinic in Lincoln County, West Virginia	500,000
Haysi Medical Clinic, Virginia	300,000
Hazard Appalachian Regional Healthcare (ARH) Regional Medical Center, Hazard, Kentucky	1,000,000
HealthNet, Inc., Indianapolis, Indiana	300,000
Heller School for Social Policy and Management, Brandeis University, Waltham, Massachusetts	900,000
Hi-Desert Medical Center, Joshua Tree, California	700,000
Hillcrest Health Care Center, Tulsa, Oklahoma	1,050,000
Holy Cross Hospital, Fort Lauderdale, Florida	500,000
Holy Name Hospital, Teaneck, New Jersey	200,000
Holyoke Hospital, Holyoke, Massachusetts	400,000
Hopeland Health Center, Dayton, Ohio	600,000
Hospice & Palliative Care of Louisville, Louisville, Kentucky	1,000,000

Hospice of Marshall County, Inc., Albertville, Alabama	1,000,000
Houston County Hospital, Crockett, Texas	550,000
Howard Center for Human Services, Burlington, VT	250,000
Hudson Headwaters Health Network, Glens Falls, New York	300,000
Hudson Valley Hospital Center, Cortland Manor, New York	500,000
Humboldt Senior Resource Center, Eureka, California	200,000
Hunterdon Healthcare System, Flemington, New Jersey, for emergency room equipment	100,000
Huntsman Cancer Institute of University of Utah, Salt Lake City, UT	1,750,000
Idaho State University	400,000
Independence Square Foundation Building Expansion, Kingston, RI	750,000
Indiana Genomics Initiative, Indiana University School of Medicine, Indianapolis	1,000,000
Indiana University Cancer Center, Indianapolis, Indiana, to develop the Indiana University Center for Bone Cancer Research	1,000,000
Institute for Research and Rehabilitation, Houston, Texas	500,000
J. Joseph Moakley Medical Services Building, Boston Medical Center, Boston, Massachusetts	2,800,000
J.P. Carr Human Services Complex, Rockdale County, Georgia	500,000
Jackson Park Hospital Foundation, Chicago, Illinois	450,000
Jersey City Medical Center, Jersey City, New Jersey	600,000
Jersey Shore Hospital, Jersey Shore, Pennsylvania, for medical equipment	100,000
Joseph P. Addabbo Family Health Center, New York, New York	500,000
Kansas City Area Life Sciences Institute, Kansas City, Missouri	2,450,000
Kansas University Imaging Facilities for cellular and molecular imaging	1,000,000
Katy Hospital, Katy, Texas, for acquisition of radiology and imaging equipment	1,700,000
Kauai Community Health Center	50,000
Kaukini Hospital (Hawaii) research facility	50,000
Kennedy Krieger Institute, Baltimore, Maryland	750,000
Kent County Hospital, Warwick, Rhode Island	300,000
Kentucky Communities Economic Opportunity Council, Inc., Appalachian Regional Wellness Center, Barbourville, Kentucky	800,000
Kings County Hospital Center, Brooklyn, New York	350,000
Klamath County Integrated Health Services Building, Klamath County, Oregon	100,000
Lakeshore Foundation, Birmingham, Alabama	250,000
Lawrence General Hospital, Lawrence, Massachusetts	500,000
Lewistown Hospital, Lewistown, Pennsylvania, for medical equipment	100,000
Lexington-Fayette County Health Department for purchase a Mammogram Machine and Professor and to purchase Laboratory Information System Equipment	100,000
Life Line Pregnancy Care Center, Leesburg, Virginia, for a sonogram machine to help single-mother pregnancies	50,000
LifeBridge Health, Baltimore, Maryland	500,000
Lighthouse Health Access Alliance, Hyannis, Massachusetts	500,000
Los Angeles City College, Los Angeles, California	240,000
Loudoun Healthcare Inc., Leesburg, Virginia	400,000
Louisiana State University Health Sciences Center, Shreveport, Louisiana, for renovation of Emergency Care Center	166,000
Louisiana State University Health Sciences Center, Shreveport, Louisiana, for Trauma Care Systems to process crucial information about a patient's injury	166,000
Louisiana State University Stanley Scott Cancer Center	100,000

Lutheran Services of South Dakota for the Canyon Hills Center in Spearfish, SD	200,000
Malone College School of Nursing, Canton, Ohio	1,000,000
Marcum Wallace Memorial Hospital, Irvine, Kentucky	1,000,000
Marcus Institute, Atlanta, Georgia	650,000
Margaretville Memorial Hospital, Margaretville, New York	200,000
Maricopa Integrated Health System, Arizona	350,000
Marklund Children's Home, West Chicago, Illinois	1,000,000
Marshall University Mid-Ohio Valley Center, Point Pleasant, West Virginia	250,000
Marshall University in West Virginia	11,000,000
Mary McClellan Hospital, Inc., Cambridge, New York	575,000
Matthew Walker Comprehensive Health Center, Nashville, Tennessee	450,000
Maui Community Health Center	100,000
Medical College of Wisconsin, Milwaukee, Wisconsin	700,000
Medical University of South Carolina Oncology Center in Charleston, SC	3,500,000
Memorial City Hospital, Houston, Texas	700,000
Memorial Health University Medical Center, Savannah, Georgia	700,000
Mental Health Association of Tarrant County, Ft. Worth, Texas, to provide school-based mental health education to schools in Tarrant County	225,000
Mercy Health Partners, Toledo, Ohio	650,000
Mercy Health Partners-Hamilton, Cincinnati, Ohio	750,000
Mercy Medical Center at Durango, Colorado	1,000,000
Mercy Medical Center, Des Moines, Iowa	1,700,000
Metropolitan Education and Training Center, Wellston, Missouri	500,000
Miami Children's Hospital Ambulatory Care Center, Miami, Florida,	267,000
Miami-Dade County, Florida, for the M.O.V.E.R.S. program	400,000
Middletown Regional Hospital Center, Middletown, Ohio	750,000
Midwest Center for Rural Health, Terre Haute, Indiana	700,000
Million Pines Family Health Center, Soperton, Georgia	38,000
Milwaukee Center for Independence, Milwaukee, Wisconsin	400,000
Miriam Hospital, Providence, Rhode Island	700,000
Mission St. Joseph's Health System, Asheville, North Carolina, for Helicopter Ambulance program	2,800,000
Mobile Medical Unit, Pinellas County Health Department, Clearwater, Florida	200,000
Model Cities Health Corporation, Kansas City, Missouri	250,000
Moneta Gardens Improvement, Inc., Hawthorne, California	300,000
Morehouse School of Medicine, Atlanta, Georgia	300,000
Morton Health Center (CHC), Oklahoma	100,000
Moses Taylor Hospital, Scranton, Pennsylvania	350,000
Mount Sinai Maternal-Child Care Center, Mount Sinai Hospital, New York, New York	500,000
Mountainview Medical Center, Montana	400,000
MultiDimensional Imaging, Inc., Newport Beach, California	1,250,000
Muskegon Community Health Project, Muskegon, Michigan	400,000
National Jewish Medical and Research Center, Denver, Colorado	1,000,000
National Nursing Centers Consortium, Philadelphia, PA.	100,000
Navidad Medical Center, Salinas, California	175,000
Neumann College, Aston, PA.	50,000
Neumann Health and Wellness Center, PA	100,000
Nevada Cancer Institute in Las Vegas, Nevada for preliminary work to establish a comprehensive cancer treatment center in southern Nevada	900,000

New Britain General Hospital, New Britain, Connecticut, for pyxis equipment	500,000
New Horizon Youth Center, Bethesda, Ohio,	125,000
New York City Health and Hospitals Corporation, Elmhurst Hospital Center	250,000
New York University Dental Clinics for the Underserved	250,000
New York University Medical Center for construction of a vaccine lab	1,500,000
New York-Presbyterian Hospital for the Allen Pavilion	900,000
Newton Regional Hospital, Newton, Mississippi	410,000
North Sunflower County Hospital, Ruleville, Mississippi	150,000
Northeast Indiana Innovation Center Biomedical Research Center, Fort Wayne, Indiana	500,000
Northern Cochise Community Hospital, Willcox, Arizona	500,000
Northwest Alabama Mental Health Center, Jasper, Alabama	250,000
Northwest Human Services, West Salem Clinic, Salem, Oregon	450,000
Northwestern Medical Center, St. Albans, Vermont	65,000
Northwestern Memorial Hospital, Chicago, Illinois	1,125,000
Northwestern University's Center for Genomics and Molecular Medicine, Evanston, Illinois	600,000
NYU Downtown Hospital, New York, New York	500,000
Oakhurst Medical Centers, Stone Mountain, Georgia	500,000
Oakwood Healthcare System, Dearborn, Michigan	450,000
Ohio State University, Columbus, Ohio, Biomedical Research and Education Center	1,000,000
Oklahoma Medical Research Foundation to modernize existing lab space, particularly labs for the arthritis and immunology program that houses much of the current research into Native American genetics.	975,000
Operation Par, Inc., Pinellas Park, Florida, for a Operation PAR Developmental Center and Therapeutic Community	4,000,000
Orthopaedic Hospital of Los Angeles	1,300,000
Our Lady of the Lake Regional Medical Center, Baton Rouge, Louisiana	200,000
Palliative Care Center and Hospice of the North Shore, Evanston, Illinois	300,000
Paradise Valley Hospital, National City, California	100,000
Peach County Hospital Authority, Fort Valley, Georgia	50,000
Penn State Milton S. Hershey Medical Center, Hershey, PA.	1,630,000
Philipsburg Hospital, Philipsburg, Pennsylvania, for medical equipment	100,000
Pinnacle Health, Harrisburg, PA	250,000
Pioneer Valley Life Sciences Initiative joint venture between the University of Massachusetts and Baystate Medical Center	1,200,000
Placer County Children's Emergency Shelter, Auburn, California	900,000
Polk County Central 911 Dispatch Center, Bolivar, Missouri, for computer aided dispatch software and global positioning satellite	150,000
Prentiss Regional Hospital, Prentiss, Mississippi	150,000
Preventive Medicine Research Institute, Sausalito, California	150,000
Proctor Hospital, Peoria, Illinois	800,000
Puget Sound Blood Center, Seattle, Washington	400,000
Quinnipiac University, Hamden, Connecticut	750,000
Rainbow Babies Center for Child Health, Cleveland, Ohio	1,025,000
Rhode Island Hospital, Hasbro Children's Hospital, Providence, Rhode Island	1,000,000
Rhode Island Hospital, Providence, RI	500,000

Rochelle Healthcare Clinic, Rochelle, Georgia	50,000
Rock Island (IL) facility of Community Health Care, Inc., Davenport, Iowa	450,000
Rockford Health System (RHS), Rockford, Illinois	200,000
Rocking Horse Center, Springfield, Ohio	350,000
Rural Health Collaborative of Southern Ohio, Georgetown, Ohio - Multi-Specialty Healthcare Treatment Center	1,000,000
Rush-Copley Medical Center, Aurora, Illinois	1,000,000
Rush-Presbyterian Medical Center, Chicago, Illinois	525,000
Rutgers University Genetics Building	800,000
Sacred Heart Hospital, Allentown, PA.	750,000
Saginaw Chippewa Tribe of Michigan for the Victims of Crime program	1,100,000
Saint Anne's Hospital, Fall River, Massachusetts	775,000
Salt Lake Donated Dental Services, Salt Lake City, Utah	100,000
Samuel U. Rodgers Community Health Center, Kansas City, Missouri for its Lexington, Missouri facility	1,100,000
Sandhills Medical Foundation, Jefferson, South Carolina, for its McBee facility	600,000
Schenectady Family Health Services, Schenectady, New York	500,000
Shamokin Area Community Hospital, Coal Township, PA.	250,000
Shands Jacksonville Hospital, Jacksonville, Florida	1,000,000
Siouxland District Health	800,000
Soldiers and Sailors Memorial Hospital, Wellsboro, Pennsylvania, for medical equipment	100,000
South County Hospital, Wakefield, Rhode Island	600,000
South Shore Hospital in Weymouth MA	200,000
Southeast Hospital, Houston, Texas	2,500,000
Southeast Missouri State University, Cape Girardeau, Missouri	100,000
Southern Connecticut State University, New Haven, Connecticut	800,000
Southern Illinois University School of Medicine, Springfield, Illinois	500,000
Springfield Regional Outpatient Cancer Center	325,000
St Anthony Hospital, Oklahoma City, Oklahoma	200,000
St. Alphonsus Regional Medical Center, Boise, Idaho, St. Benedict's Hospital, Jerome, Idaho	405,000
St. Catherine College Allied Health and Science Complex, Kentucky	500,000
St. Claire Medical Center, Inc., Morehead, Kentucky	150,000
St. John Bosco Clinic, Miami, Florida	233,000
St. Joseph Community Center, Lorain, Ohio	250,000
St. Joseph's Hospital and Medical Center, Paterson, New Jersey	200,000
St. Louis Childrens Hospital in Missouri for equipment and technology for the Healthy Kids Express Mobile Health Van Program	100,000
St. Luke's Hospital, Allentown, PA	750,000
St. Luke's Regional Medical Center	500,000
St. Mary's Hospital in Huntington, West Virginia	2,000,000
St. Mary's Hospital, Waterbury, Connecticut	750,000
St. Mary's Regional Medical Center, St. Mary, Pennsylvania, for medical equipment	100,000
St. Petersburg College, Florida, for consortium dental clinic equipment	500,000
St. Vincent Home for Children, Lansing, Michigan	500,000
State University of New York at Binghamton Protein Dynamics Research Facility	200,000

State University of New York Upstate Medical University & College of Environmental Science and Forestry, for equipment and program costs	725,000
State University of New York Upstate Medical University, for equipment costs of the Institute for Cardiovascular Research and Biotechnology Core Facilities Enhancement Package	325,000
Steele Memorial Hospital Foundation	50,000
Stevens Foundation for developmental and enrichment services, inc., Sanford, North Carolina	400,000
Summa Health System, Akron, Ohio,	500,000
Syracuse Community Health Center, Syracuse, New York	475,000
Tattnall Community Hospital, Reidsville, Georgia	62,000
Taylor Telfair Regional Hospital, McRae, Georgia	50,000
Temple University Hospital and Health System, Philadelphia, Pennsylvania	200,000
Tennessee Technological University, Cookeville, TN	1,100,000
Texas for the Border Health Medical Complex, City of El Paso	750,000
Texas Tech University Health Sciences Center, Lubbock, Texas, for Wellness Center	900,000
Texas Tech University's Center for Biological and Geographical Information Systems, Lubbock, Texas, for the purchase of medical-related research equipment	225,000
The New York Academy of Medicine, New York	100,000
Thomas Jefferson University, Philadelphia, PA, to purchase a 3.0 Tesla full body MRI system	1,130,000
Tom Ridge Public Health and Safety Building at Mercyhurst College, Erie, Pennsylvania	400,000
Touro University College of Osteopathic Medicine, Vallejo, California	550,000
Travelers Aid of Rhode Island, Providence, Rhode Island	750,000
Tri-County Community Dental Clinic in Appleton, Wisconsin	330,000
Trousdale Medical Center, Hartsville, Tennessee	400,000
Truman Medical Center, Missouri	1,000,000
Tyler Memorial Hospital, Tunkhannock, Pennsylvania, for equipment	450,000
UMDNJ-Robert Wood Johnson Medical School, Child Health Institute of New Jersey, New Brunswick, New Jersey	250,000
University Medical Center in Las Vegas, Nevada for the Neonatal ICU and Women's Service Area	300,000
University Medical Center, Tucson, Arizona	800,000
University of Alabama, Birmingham, Interdisciplinary Biomedical Research Institute	10,000,000
University of Arizona Institute for Biomedical Science and Biotechnology, Tucson, Arizona	700,000
University of Arizona, Tucson, Arizona, for Bioscience and Biomedicine Institute International Genomics Consortium	1,500,000
University of California, San Diego, to purchase and install new angiography equipment in a new interventional radiology unit	100,000
University of Cincinnati Medical Center, Cincinnati, Ohio	1,000,000
University of Illinois College of Medicine, Rockford, Illinois	1,500,000
University of Louisiana at Monroe College of Health Sciences	500,000
University of Louisville Research Foundation, Kentucky, to the Center for Oral Health and Systemic Disease	700,000
University of Louisville's Cardiac Innovation Institute for equipment	1,200,000

University of Louisville's Science and Technology Research Center, Kentucky	1,700,000
University of Maryland School of Pharmacy, Baltimore	350,000
University of Mississippi in Jackson, Mississippi	4,000,000
University of Mississippi in Oxford	950,000
University of Mississippi Medical Center, Jackson, Mississippi	3,000,000
University of Nebraska Medical Center	2,000,000
University of Nebraska Medical Center, Omaha, Nebraska, to enhance distance-learning facilities that train nurses in rural areas	500,000
University of New Mexico Health Sciences Center Education building	2,000,000
University of North Texas Health Science Center, Fort Worth, Texas, for CAT Scan machine	800,000
University of Pennsylvania, Philadelphia, PA.	1,630,000
University of Pittsburgh Medical Center, Pittsburgh, Pennsylvania	1,630,000
University of Pittsburgh School of Medicine, PA for Mobilization for Autism initiative	250,000
University of Pittsburgh, McGowan Institute for Regenerative Medicine, Pittsburgh, PA	1,780,000
University of San Diego, Hahn School of Nursing, San Diego, California	200,000
University of South Alabama Gulf Coast Cancer Center and Research Institute	3,500,000
University of South Dakota School of Medicine in Vermillion, SD	500,000
University of South Florida Center for Biological Defense, Tampa, Florida	5,000,000
University of South Florida Health Sciences Center and College of Medicine, Tampa, Florida	3,000,000
University of Tennessee Graduate School of Computational Engineering, Chattanooga, Tennessee, for SimCenter project to perform simulations to study ocean/atmospheric issues associated with global climate	500,000
University of Tennessee Medical Center, Knoxville, TN	1,000,000
University of Texas Health Center at Tyler, Texas	200,000
University of Texas M.D. Anderson Cancer Center, Houston, Texas	2,000,000
University of Texas Southwestern Medical Center and UT Dallas, for sickle cell disease	400,000
University of Texas Southwestern Medical School, for FMRI	450,000
University of Texas Southwestern Medical School, for the stroke center	1,250,000
University of Washington Life Sciences Research facility, Seattle, WA	3,500,000
University of Wisconsin-Milwaukee Institute for Urban Health Partnerships	250,000
Vanderbilt Children's Hospital, Nashville, TN	1,000,000
Veterans New Jersey Health Care Systems, Morris Township	250,000
Visiting Nurse Association of Fox Valley, Aurora, Illinois	550,000
Visiting Nurses Association Care Watch Program, Cleveland, Ohio to purchase equipment	405,000
W.A. Foote Memorial Hospital, Jackson, Michigan	500,000
Wake Forest Comprehensive Cancer Center, Winston Salem, North Carolina	500,000
Walden House, San Francisco, California	400,000
Wendell Foster's Campus for Developmental Disabilities, Owensboro, Kentucky	500,000
West Virginia School of Osteopathic Medicine for the Robert C. Byrd Clinic	2,750,000
West Virginia University School of Medicine	3,000,000
Western Michigan University, Kalamazoo, Michigan, to establish a distance learning facilities at WMU's for Occupational Therapy, Physician Assistants Program, Nursing and Speech Pathology and Audiology	500,000
Wexner Heritage Village, Columbus, Ohio,	200,000

White River Medical Center, Batesville, Arkansas	500,000
Whitman-Walker Clinic, Inc., Washington, DC	350,000
Wills Eye Hospital, Philadelphia, PA	1,100,000
Windber Research Institute, Johnstown, Pennsylvania	250,000
Wyoming Valley Health Care System, Wilkes-Barre, Pennsylvania	300,000
Yeshiva University, Albert Einstein School of Medicine, New York, New York	1,200,000
YMCA of Western Stark County Massillon, Ohio, for Emergency Health Facility	2,000,000
Zucker Hillside Hospital of North Shore Long Island Jewish Health System, Queens, New York	450,000
Albert Einstein Healthcare Network, Philadelphia, Pennsylvania	1,630,000
Allegheny General Hospital, Pittsburgh, PA., for purchase of equipment to expand the Genomic Sciences at the Allegheny Singer Research Institute	1,630,000
Carnegie Mellon University, Pittsburgh, PA.	1,630,000
Children's Hospital of Philadelphia, Philadelphia PA, for equipment	500,000
Children's Hospital of Pittsburgh, Pittsburgh, PA.	500,000
Crozer-Keystone Health System, Springfield, PA.	100,000
Ephrata Community Hospital, Ephrata, PA., for equipment	200,000
Fox Chase Cancer Center, for construction of a Laser Accelerated Proton Facility & a cyberknife radiosurgery system.	1,630,000
Lehigh Valley Hospital & Health Network, PA	750,000
Magee-Womens Hospital and Research Institute, Pittsburgh, PA	1,630,000
Main Line Health - Jefferson Health System, PA	500,000
Nazareth Hospital, Philadelphia, PA	250,000
Philadelphia College of Osteopathic Medicine, Philadelphia, PA	200,000

The conference agreement includes bill language to limit the amount available for Federal tort claims within community health centers funding to not more than \$40,000,000 instead of \$25,000,000 proposed by H.R. 246 ^{and} _^ instead of \$50,000,000 as proposed by the Senate.

The conference agreement includes bill language identifying \$275,138,000 for family planning instead of \$265,275,000 as proposed by H.R. 246 and \$285,000,000 as proposed by the Senate.

The conference agreement includes \$1,514,651,000 for community health centers instead of \$1,533,570,000 as proposed by the Senate and \$1,457,864,000 as proposed by H.R. 246. The conferees concur with

language contained in the Senate explanatory statement that not less than \$9,000,000 be provided for Native Hawaiian health care activities.

The conferees have provided an increase above the request for community health centers in order to continue the initiative to add health center sites and expand services while also allowing increased grant support to existing centers for economic stabilization and to offset the rising cost of current services. While many health centers may be very efficient providers of services, they are not immune from the cost increases faced by all health care providers. Further, health centers are facing additional cost pressures as a result of the rising number of people without health insurance. For these reasons, the conferees expect HRSA to use a portion of the increased funding to increase basic support for existing health centers based on performance-related criteria, in addition to site and service expansion applications.

The conferees direct HRSA to provide a report to the House and Senate Committees on Appropriations no later than September 30, 2003 regarding the methodology used in distributing fiscal year 2003 health center appropriations and the methodology intended to be used in fiscal year 2004, including the actual and intended division of funds among new or expanded sites, service expansions, and adjustments to help cover the increased cost of

ongoing services, as well as the formula or other methodology used in allocating the portion intended to help cover increased costs.

The conference agreement includes \$46,249,000 for the national health service corps field placements instead of \$46,000,000 as proposed by H.R. 246 and \$46,498,000 as proposed by the Senate. The conferees support the Student Resident Experiences and Rotations in Community Health (SEARCH) program within the national health service corps and intend that HRSA continue this program in fiscal year 2003.

The conference agreement includes \$125,959,000 for national health service corps recruitment instead of \$109,000,000 as proposed by H.R. 246 and \$142,918,000 as proposed by the Senate. The conferees intend that \$3,000,000 of this amount be designated for the chiropractic program authorized under section 338L of the Public Health Service Act.

The conference agreement includes \$423,961,000 for health professions instead of \$392,582,000 as proposed by H.R. 246 and \$424,066,000 as proposed by the Senate.

The conferees intend that the graduate psychology education program be continued within the funds provided for allied health and other disciplines, and that a geropsychology graduate training program be established within allied health.

The conferees provide \$28,000,000 for geriatrics education. Within the total provided, \$16,800,000 is directed to geriatric education centers, \$6,500,000 is designated for geriatric training programs, and \$4,700,000 is directed to geriatric academic career awards.

The conferees agree with the Senate explanatory statement directing HRSA to fund training components of chiropractic demonstration grants.

Within the funding for health professions training, the conference agreement provides \$113,502,000 for nurse training programs instead of \$98,502,000 proposed by H.R. 246 and \$118,502,000 proposed by the Senate. The conferees have appropriated funding to establish programs authorized under the Nurse Reinvestment Act (P.L. 107-205), renamed existing line items to reflect these new authorities, and added new line items to fund these programs. The conferees have relabeled "Basic Nurse Education and Practice" the "Nurse Education, Practice, and Retention Grants" and relabeled the "Loan Repayment Program" the "Loan Repayment and Scholarship Program" to reflect the additional authorities provided under Sections 831 and 846, respectively, of the Public Health Service Act as modified by P.L. 107-205. In using the increase in funding provided above the fiscal year 2002 level, the conferees expect HRSA to give preference in funding to internship and residency programs (Sec.

831(a)(2)), career ladder programs (Sec. 831(c)(1)), and enhancing patient care delivery systems (Sec. 831(c)(2)) as required under Sec. 831(e) of the PHSA. The conferees have provided funding for scholarships (Sec. 846 (d)) for nursing students in exchange for service as a nurse for at least two years at a health care facility with a critical shortage of nurses. The conferees have also appropriated funding to establish the Nurse Faculty Loan Program and Comprehensive Geriatric Education, Sections 846A and 855 of the PHSA. The Nurse Faculty Loan Program will help increase the number of faculty at schools of nursing. Comprehensive Geriatric Education will train and educate individuals in providing geriatric care for the elderly. The conferees intend that nurse loan repayment funding should be directed to high priority urban and rural areas with severe nursing shortages.

The conference agreement does not include funding for the Healthy Communities initiative. H.R. 246 proposed \$10,000,000 for the program and the Senate proposed \$20,000,000. Additional funds have been provided to the Centers for Disease Control and Prevention for this purpose.

The conference agreement includes \$734,741,000 for the maternal and child health block grant instead of \$726,931,000 as proposed by H.R. 246 and \$741,531,000 as proposed by the Senate.

within
HRSA

The conference agreement includes bill language designating \$115,900,000 of the funds provided for the block grant for special projects of regional and national significance (SPRANS). Neither H.R. 246 nor the Senate bill earmarked funds for this purpose. It is intended that \$4,000,000 of the SPRANS amount will be used to continue the sickle cell newborn screening program and its locally based outreach and counseling efforts. In addition, \$5,000,000 of the SPRANS amount will be used for oral health demonstration programs and activities in the States as described in the Senate explanatory statement, \$500,000 will be used for the City of Milwaukee Health Department for a pilot program providing health services to at-risk children in day care, and \$10,000 will be used for the Dane County Neighborhood Child Health Clinic in Milwaukee, Wisconsin to provide *Madison* child dental services.

The conference agreement includes bill language identifying \$55,000,000 for abstinence education instead of \$60,000,000 as proposed by H.R. 246 and \$40,000,000 as proposed by the Senate.

The conferees note that abstinence messages to a group of youth by a grantee should not be diluted by any instructor or materials from the same grantee. Adolescents should not be discouraged from seeking health information or services. HHS should not preclude entities who are teaching

abstinence-only classes and who have a public health mandate from discussing other forms of sexual conduct or providing services, as long as this is conducted in a different setting from the abstinence-only course. In allocating grant funds, HRSA should give priority to those organizations that have a strong record of support of abstinence education as defined in sections (a) through (h) of Title 5, section 510(b)(2) of the Social Security Act.

The conference agreement includes \$98,989,000 for healthy start as proposed by the Senate instead of \$94,811,000 as proposed by H.R. 246.

The conferees recognize the life-saving success of the National Marrow Donor Program. In light of the new nuclear and chemical threats facing the country, the conferees encourage the National Marrow Donor Program to increase its public health preparedness efforts by developing and maintaining a national emergency response plan to ensure an adequate supply of needed marrow and blood stem cells. The conferees also support the National Marrow Donor Program's efforts to expand the sources of blood stem cells through its work on a cord blood bank initiative. The conferees encourage the NMDP to focus on the following areas: (1) recruitment of donors, with an emphasis on minority donors; (2) enhancement of cord blood banks through increased recruitment efforts,

research, and other cord blood bank support; and (3) expansion of the NMDP's role in research related to improving outcomes of patients who receive bone marrow transplants.

The conference agreement includes \$58,500,000 for rural health outreach grants as proposed by H.R. 246 instead of ~~\$51,472,000~~ as proposed by the Senate. The conference agreement include the following amounts for the following projects and activities in fiscal year 2003:

Aberdeen Area Tribal Chairman's Health Board in Aberdeen, SD to support the Northern Plains Healthy Start Project	\$750,000
Alaska Department of Health and Social Services Program to Reduce High Anemia rate in children in the Yukon Kuskokwin Delta and the Bristol Bay region	400,000
Alaska Family Practice Residency Program to support additional medical residents in Alaska to provide services for underserved populations	500,000
Bannock County Regional Medical Center, Pocatello, Idaho, to purchase Mammography Unit and provide mobile mammography screening to the rural areas of Southeast Idaho.	400,000
Center for Acadiana Genetics and Hereditary Health Care for continue and expand the development of the center	550,000
College of Saint Mary for education, recruitment and retention of nurses in rural communities	250,000
Commun-I-Care in Columbia, SC to support a program that distributes prescription drugs to low income, uninsured South Carolinians	300,000
Community Health Works in Forsyth Georgia, to expand services and information technology systems	50,000
Cooperative Education Service Agency No. 11 in Turtle Lake, Wisconsin for a dental program	750,000
Delta Health Alliance in Mississippi for a multi-university partnership to address delta health problems	1,200,000
Eastern Maine Healthcare, Rural Maine Health Improvement Demonstration Program to address the inconsistencies in the current rural health care delivery system	250,000
Eastern Oregon University Rural Frontier Delivery Healthcare Education Program for innovative nurse training	250,000
Ellen Stephen Hospice in Kyle, South Dakota to provide healthcare services to people in rural areas of South Dakota	100,000
Full Circle Women's Health in Madison, Florida, for a project to improve pregnancy care	95,000
Georgia Southern University, Statesboro, Georgia, for rural healthcare delivery services and nurse training/education and distance learning for students and healthcare professionals	300,000

Good Samaritan Regional Medical Center, Pottsville, PA to establish the Schuylkill County Rural Health Consortium	250,000
Grace Medical Clinic in Mayfield, Kentucky for wellness programs	100,000
Harrison Community Hospital, Cadiz, Ohio, for on-going delivery of healthcare to rural economically distressed woman, children and men	125,000
Idaho Children's Health Initiative	500,000
Marquette University to provide dental care to underserved communities through mobile dental clinics	350,000
Marshall University for the West Virginia Children's Health Project	500,000
Menominee Indian Tribe of Wisconsin, Keshena, Wisconsin to provide critical pre-natal care to pregnant women	80,000
Mercy Housing, Inc. in Denver, Colorado to provide health care in coordination with affordable housing for low income families, seniors, and individuals with disabilities	300,000
Millinocket Regional Hospital in Millinocket, Maine, for a project to provide health care for the uninsured and underinsured population of eastern Maine	900,000
New Mexico-Hawaii telehealth project in remote and rural areas - Telehealth Outreach for Unified Community Health (TOUCH).	1,000,000
Ohio University in Athens, Ohio, for its Appalachian Rural Health Institute	500,000
Oregon Center for Nursing for innovative nurse training	235,000
Our Lady of Bellefonte Hospital Foundation in Ashland, Kentucky for its community wellness mobile clinic	350,000
Phoenix Children's Health Project in Arizona to address the health needs of extremely vulnerable homeless and runaway youth in underserved rural and urban areas	350,000
Pittsburgh Mercy Health System, Pittsburgh, PA. for health outreach and education	200,000
Porcupine Clinic in Porcupine, SD to provide healthcare services to people in rural areas of South Dakota	250,000
Progressive Family Services Health Center in Canton, Mississippi	100,000
Sioux City Community Health Center, Iowa, to establish a mobile health clinic	300,000
Smith Township Volunteer Fire Department, Jacobsburg, Ohio, for all purpose emergency response vehicle and rescue trailer for use in providing emergency medical services in inaccessible rural areas	15,000
St. Luke's Free Clinic in Kentucky to improve health care access for underserved populations	200,000
The Children's Health Fund, New York, New York, to improve access to health care for many of Pennsylvania's underserved children	165,000
University of Alabama at Birmingham Oral Health Initiative	300,000
University of Alabama Capstone Nursing School to improve the quality of primary care in rural Alabama	150,000
University of Alaska Fairbanks Development of Research and Evaluation agenda for health care delivery	950,000 850,000
University of Alaska-Anchorage to recruit and retain Alaska Natives as nurses	600,000 500,000
University of North Carolina at Wilmington School of Nursing, for its Bolton, North Carolina primary health care facility	400,000
University of North Dakota School of Medicine to support its rural health program in preventative medicine and behavioral sciences.	1,100,000
University of Pennsylvania School of Dental Medicine, Philadelphia, PA for its minority outreach oral health initiative	200,000
University of Southern Mississippi Center for Sustainable Health Outreach	500,000

University of Washington, School of Medicine, Seattle, Washington, for WWAMI Demonstration/Assistance Rural Training project	500,000
Wagner-Lake Andes Ambulance District in Wagner, SD to provide emergency health services to people in rural areas of South Dakota	100,000
Waimanalo Community Health Center American Samoan outreach	200,000
Washington Health Foundation, Seattle, Washington, for a Rural Hospital Quality Network project	100,000
Weber State University in Utah to prepare nurses for providing care in rural settings	500,000
West Virginia University Center for Rural Emergency Medicine for the Injury Control Training and Demonstration Center	1,200,000
Western Kentucky University's Mobile Health Screening Program	400,000

Insert A The conferees continue to be concerned about the health care needs of those in the Mississippi River Delta region. The conferees provide \$6,800,000 for rural health outreach to continue the ongoing initiative in eight States. These grants provide funding and technical assistance to help underserved rural communities identify and better address their health care needs and to help small rural hospitals improve their financial and operational performance. The conferees further recommend that HRSA consult with the Delta Regional Authority and the Delta Health Alliance, given their ongoing relationships with communities in the Delta.

The conference agreement provides \$10,700,000 for rural health research instead of \$16,808,000 as proposed by the Senate and \$9,190,000 as proposed by H.R. 246.

The conferees include the following amounts for the following projects and activities in fiscal year 2003:

Insert A

U.S. and Developing Country Medical Centers Program for the linking of U.S. academic medical centers with developing country medical centers to facilitate mutual capacity building through the exchange of clinicians between the two institutions so that care providers in the developing world can learn, first hand, from those in the U.S. who are most experienced in AIDS care

200,000

Mercer University Health Sciences Center in Macon, Georgia for a rural health care task force	\$50,000
University of North Dakota School of Medicine and Health Sciences in Grand Forks, North Dakota for its rural health program in preventative medicine and behavioral sciences	350,000
University of Pittsburgh Bradford Center for Rural Health, Bradford, Pennsylvania	300,000

The conference agreement includes \$27,062,000 for telehealth instead of \$4,000,000 as proposed by H.R. 246 and \$39,192,000 as proposed by the Senate.

The conferees include the following amounts for the following projects and activities in fiscal year 2003:

Advanced Technology Institute, North Charleston, South Carolina, Telehealth Deployment Center	\$416,000
Alaska Federal Health Care Access Network Telemedicine Project	100,000
Banner Health System Telemedicine Program for equipment and infrastructure for telemedicine program to help provide care to rural and underserved areas in Arizona, Colorado, and Alaska	250,000
Baycare Health Systems, Clearwater, Florida, for a Medical Information Systems Initiative	1,000,000
Beaufort-Jasper-Hampton Comprehensive Health Services for a telehealth program to investigate techniques to prevent prostate cancer.	700,000
Burlington Community Health Care in Burlington, Vermont for new technology infrastructure to reduce medical errors	500,000
CareOregon, Oregon Community Health Information Network, for the implementation of Electronic Medical Record software for safety net and community clinics.	75,000
Case Western Reserve University, Cleveland, Ohio, for a Netwellness program	750,000
Children's Hospital and Regional Medical Center, Seattle, for implementation of the Children's Health Access Regional Telemedicine Network	500,000
Cook Children's Medical Center in Fort Worth, Texas for a rural specialty health telemedicine initiative	500,000
Foundation for eHealth Initiative, Washington, DC, for demonstration on electronic medical data interchange and sharing to support improve regional healthcare delivery	4,000,000

Geisinger Health System, Harrisburgh, PA., for the Rural PA Stroke Care Partnership	1,630,000
Idaho State University for expansion of the telehealth integrated care center	1,500,000
Iowa Telecare Consortium to develop a disease management demonstration project in Iowa	600,000
James Whitcomb Riley Hospital for Children Telemedicine Program, Indianapolis, Indiana	500,000
La Crosse Medical Health Science Consortium in Racine, Wisconsin to establish virtual health centers in eight counties	350,000
Lake Charles Memorial Hospital, Lake Charles, Louisiana, Community Hospital Telehealth Consortium	450,000
Massachusetts College of Pharmacy and Health Sciences for telehealth programs at its Worcester campus Health and Education Resource Center	450,000
Midwest Rural Telemedicine Consortium, Mason City, Iowa	700,000
Minot State University in West Minot, North Dakota for a project using telehealth technologies for hearing assessment and hearing loss rehabilitation	150,000
Montefiore Medical Center, Bronx, New York, and the Children's Hospital at Montefiore's Clinical Information System to complete a Clinical Information System	200,000
New York-Presbyterian Hospital in New York City for its Community Hospital of the 21st Century medical informatics technology demonstration project	500,000
North Dakota State University College of Pharmacy in Fargo, North Dakota to field test telepharmacy technology in several rural pharmacy locations	600,000
North Idaho Rural Telehealth Program	650,000
Northwest Area Center for Studies on Aging in Billings, Montana.	750,000
Oklahoma State Department of Health, Oklahoma City, Oklahoma, for a Mississippi-Oklahoma Rural Telemedicine Initiative	500,000
Pennsylvania Homecare Association in conjunction with the Pennsylvania State University for telehomecare, PA	250,000
Primary Care Association of Hawaii Telehealth and Outreach	400,000
South Alabama Telemedicine Project to create enhanced connectivity between rural emergency departments and the University of South Alabama Medical Center	300,000
St. Elizabeth Hospital Community Foundation in Appleton, Wisconsin for telemedicine equipment to provide medical care to underserved patients in northeastern Wisconsin	100,000
St. Vincent Healthcare in Billings, Montana to expand the regional video telecommunications network for healthcare providers	700,000
Susquehanna Health System, Williamsport, PA for Electronic Medical Information and Physician Access	500,000
University at Buffalo and State University of New York, Buffalo, Erie County, New York, for Buffalo Center of Excellence in Bioinformatics	1,000,000
University of Colorado Health Sciences Center, Denver, Colorado, for American Telehealth Center to expand curricular content, in terms of healthcare workforce-related topics, personnel and equipment	666,000
University of South Alabama Office of Emerging Technologies in Mobile, Alabama for home based telehealth disease management tools and telemedicine applications	200,000
University of Texas Medical Branch in Galveston, Texas for its telehealth resource center	500,000

Visting Nurse Association of Houston in Houston, Texas for study of clinical outcomes and health care costs among congestive heart failure patients who are monitored through home telemonitoring

125,000

The conference agreement provides \$8,500,000 for State offices of rural health instead of \$10,000,000 as proposed by the Senate and \$4,000,000 as proposed by H.R. 246.

The conference agreement includes \$27,500,000 for the Denali Commission instead of \$30,000,000 as proposed by the Senate. H.R. 246 contained no similar provision. The conferees reinforce language in the Senate explanatory statement indicating that the Denali Commission should allocate funds to a mix of service facilities.

The conference agreement includes \$19,500,000 for emergency medical services for children instead of \$18,000,000 as proposed by H.R. 246 and \$20,000,000 as proposed by the Senate.

The conference agreement includes \$22,500,000 for poison control instead of \$20,000,000 as proposed by H.R. 246 and \$24,000,000 as proposed by the Senate.

The conference agreement includes \$9,500,000 for traumatic brain injury instead of \$10,000,000 as proposed by H.R. 246 and \$9,000,000 as proposed by the Senate.

The conference agreement includes \$3,499,000 for trauma care instead of \$5,000,000 as proposed by the Senate. H.R. 246 contained no similar provision.

The conference agreement includes a total of \$2,031,005,000 for Ryan White programs, of which \$25,000,000 is provided through the evaluation set-aside, instead of \$1,930,204,000 as proposed by H.R. 246 and \$2,051,295,000 as proposed by the Senate. Included in this amount is \$622,741,000 for emergency assistance, \$1,060,285,000 for comprehensive care, \$199,672,000 for early intervention, \$74,032,000 for women, infants, children, and youth, \$13,493,000 for dental services, and \$35,782,000 for education and training centers.

The conference agreement includes bill language identifying \$719,000,000 for the Ryan White Title II State AIDS drug assistance programs instead of \$659,000,000 as proposed by H.R. 246 and \$739,000,000 as proposed by the Senate. The conference agreement also includes bill language making available \$25,000,000 under section 241 of the Public Health Service Act to carry out Ryan White Special Projects of National Significance as proposed by the Senate. H.R. 246 had no similar provision.

The conferees intend that at least 90 percent of total title IV funding be provided to grantees. With the exception of funds provided through the Minority HIV/AIDS Initiative, the conferees expect the funding increase to be used primarily to support maintenance of existing care services because of the rising costs of providing comprehensive care and the implementation of quality management programs. The conferees intend that HRSA use a significant portion of the remaining funds to expand comprehensive services for youth. The conferees are pleased by current efforts to facilitate ongoing communication with and among grantees about the administration of title IV programs and expect the agency to expand these efforts. The conferees request the agency to work with grantees to develop effective title IV-specific site visit methodologies.

Some 5 percent of the funds appropriated under this section may be used to provide peer-based technical assistance. Within this amount, sufficient funds are available to maintain and expand work being done to create a national consumer and provider education center on the use of various strategies in the care of children, youth, women and families infected with or affected by HIV and AIDS.

Within the total provided, \$131,200,000 is for Ryan White AIDS activities that are targeted to address the growing HIV/AIDS epidemic and

its disproportionate impact upon communities of color, including African Americans, Latinos, Native Americans, Asian Americans, Native Hawaiians, and Pacific Islanders. The conferees expect HRSA to follow the fiscal year 2002 House report ~~accompanying this bill~~ regarding the disbursement of these funds.

Consistent with this overall direction, these funds are allocated as follows:

Emergency assistance -- Within the total provided, \$43,800,000 is for competitive, supplemental grants to improve the HIV-related health outcomes for communities of color and reduce existing health disparities.

Comprehensive care programs -- Within the total provided, \$7,000,000 is for State HIV care grants to support educational and outreach services to increase the number of eligible minorities who access HIV/AIDS treatment through AIDS Drug Assistance Programs (ADAP).

Early intervention program -- Within the total provided, \$53,400,000 is for planning grants and Early Intervention Service (EIS) grants to health care providers with history of serving communities of color.

Pediatric demonstrations -- Within the total provided, \$18,500,000 is to sustain and expand efforts to deliver comprehensive, culturally competent

and linguistically appropriate research-based intervention and HIV care services to minority women, infants, and children.

Education and training centers -- Within the total provided, \$8,500,000 is to increase the training capacity of centers to expand the number of community-based minority health care professionals with treatment expertise and knowledge about the most appropriate standards of HIV/AIDS-related treatments and medical care for HIV infected adults, adolescents and children.

The conference agreement provides \$292,000,000 for children's hospitals graduate medical education as proposed by H.R. 246 instead of \$285,000,000 as proposed by the Senate.

The conference agreement includes \$120,000,000 for the community access program as proposed by H.R. 246 instead of \$120,027,000 as proposed by the Senate. Within the total provided, \$105,000,000 is for grants to develop and expand integrated systems of care and address service gaps within such integrated systems. The conferees intend to permit these funds to be available both for new Healthy Communities Access Program grants under the new section 340 of the Public Health Service Act, as well as renewal (to the extent appropriate based on programmatic considerations) of grants initially made during fiscal years 2000 through 2002 under section

301 demonstration authority and guidance contained in previous appropriations conference reports. Within the total provided, the remaining \$15,000,000 is to continue the initiative to assist States to identify the characteristics of the uninsured within the State and develop approaches for providing all uninsured persons with health coverage. The conferees intend these funds to be available to provide additional grants to States that have previously received planning grants in order to assist such States in continuing their data gathering, analysis and planning processes, as well to provide initial grants to additional States as appropriate. ^{as}

The conference agreement includes \$156,562,000 for program management instead of \$149,294,000 as proposed by H.R. 246 and \$143,354,000 as proposed by the Senate. The conferees expect HRSA to use no more than one percent of the funds allocated for projects for agency administrative expenses.

The conferees are concerned that planned efforts to restructure HRSA programs and grants management functions could have a negative effect on many HRSA grantees. The centralization of grant decision-making, coupled with the changing roles of staff in HRSA's field offices, could significantly diminish the institutional knowledge and expertise in community-based health care that is crucial to leading HRSA forward during this important

period. Further, contemplated changes in the role of project officer to reduce technical assistance functions in favor of increased focus on grantee performance reviews may serve to undermine the development and functioning of HRSA funded programs and is of great concern to the conferees. The conferees recommend that these changes not be undertaken until they can work with all stakeholders, including Congress, to show that they will not reduce the level and scope of assistance provided to grantees.

The conferees include the following amounts for the following projects and activities in fiscal year 2003:

Social Services	Catholic ACF/SSR, The Bridge, Wilkes Barre, PA. for abstinence education and related services	\$46,000
	CentraCare Health Foundation for administration, St. Cloud, Minnesota, to increase the ability of educational institutions to produce nurses in a region with high demand	500,000
	Chester County Health Department, Chester County Government Services Center, West Chester, for abstinence education and related services	41,000
	City of Chester, Bureau of Health, SABER Project, Chester, PA, for abstinence education and related services	105,000
	George Washington Carver Community Center, Project A.C.E., Norristown, PA., for abstinence education and related services	86,000
	Heart Beat, New Bloomfield, PA., for abstinence education and related services	51,000
	Keystone Central School District, Central Mountain Middle School East, Lock Haven, PA., for abstinence education and related services	79,000
W	Keystone Economic Development Corporation, Johnstown, PA., for abstinence education and related services	88,000
	L.V.C.P.T.P., St Luke's Health Network, CHOICE program, Bethlehem, PA, for abstinence education and related services	92,000
	Lackawanna Trail School District, Factoryville, PA, for abstinence education and related services	74,000
	LaSalle University, Philadelphia PA. , for abstinence education and related services	112,000

Mercy Hospital of Pittsburgh, Pittsburgh, PA, for abstinence education and related services	111,000
Neighborhood United Against Drugs, Philadelphia, PA, for abstinence education and related services	136,000
New Brighton School District, New Brighton, PA, for abstinence education and related services	23,000
Northeastern Ohio Universities College of Medicine, Rootstown, Ohio, for the Center for Leadership in Public Health and Community Medicine	1,250,000
Nueva Esperanza, Philadelphia, Pa for abstinence education and related services	72,000
Partners in Family and Community Development, Athens, PA., for abstinence education and related services	72,000
Potter County Human Services, Roulette, PA., for abstinence education and related services	50,000
Rape and Victim Assistance Center of Schuylkill County, Pottsville, PA., for abstinence education and related services	71,000
Real Commitment, Gettysburg, PA, for abstinence education and related services	82,000
School District of Lancaster, Project IMPACT, Lancaster, PA, for abstinence education and related services	101,000
School District of Philadelphia, Philadelphia, PA, for abstinence education and related services	102,000
Silver Ring Thing Program, Sewickley, Pennsylvania, for expansion of a program promoting abstinence	700,000
The Guidance Center, project RAPPORT, Smethport, PA for abstinence education and related services	74,000
To Our Children's Future with Health, Inc., Philadelphia, PA., for abstinence education and related services	109,000
Tressler Lutheran Services, Harrisburg, PA, for abstinence education and related services	136,000
Tuscarora Intermediate Unit, Mcveytown, PA., for abstinence education and related services	84,000
University of Akron, Ohio, for a nursing study	500,000
University of Florida, Gainesville, Florida, for Consortium to Promote Nursing Faculty	1,000,000
University of Louisville Research Foundation, Kentucky, to establish a Center for Cancer Nursing Education and Research	300,000
Urban Family Council, Philadelphia, PA., for abstinence education and related services	126,000
Venago County Area Vo-Tech, Oil City, PA., for abstinence education and related services	41,000
Washington Hospital Teen Outreach, Academy for Adolescent Health, Washington, PA., for abstinence education and related services	136,000
William Beaumont Hospital, Royal Oak, Michigan, for the Beaumont Nurse Anesthesia Education Rural Initiative	300,000
Women's Care Center of Erie County, Inc., Abstinence Advantage Program, Erie, PA., for abstinence education and related services	136,000
York County, Human Life Services, Inc. York, PA., for abstinence education and related services	50,000
Community Ministries of the Lutheran Home at Topton, Reading, PA for abstinence education and related services	95,000
Clarke College in Dubuque, IA, for the planning of a community health center	50,000

Clinical Pharmacy Training Program at University of Hawaii at Hilo	700,000
Family Voices of Iowa in the ASK Resource Center, Des Moines, IA, to continue and expand the Family to Family Health Information Center	100,000
Iowa Dept of Public Health to continue the Center for Healthcare Workforce Shortages	1,000,000
National Healthy Start Association, Baltimore, Maryland, to gather and disseminate information on best practices under the Healthy Start program and provide technical assistance to Healthy Start grantees	350,000
Tulsa Coalition for Children's Health in Tulsa, Oklahoma for a study regarding delivery of pediatric health care in northeastern Oklahoma	125,000
Waianae Coast Community Health Center leadership training	50,000

CENTERS FOR DISEASE CONTROL AND PREVENTION

Disease Control, Research, and Training

The conference agreement includes \$4,506,965,000 for disease control, research, and training at the Centers for Disease Control and Prevention (CDC), of which \$4,296,566,000 is provided as budget authority and \$210,399,000 is made available under Section 241 of the Public Health Service Act, instead of \$4,402,249,000 as provided by the Senate. H.R. 246 included \$4,335,839,000 for the CDC.

The conference agreement includes bill language to earmark \$268,000,000 for equipment, construction, and renovation of facilities instead of \$270,000,000 as proposed by the Senate. H.R. ~~256~~ ²⁴⁶ included \$200,000,000. Within this total, \$250,000,000 is for continuation of CDC's building program for its Atlanta facilities and \$18,000,000 is to begin construction and purchase equipment for the replacement of CDC's infectious disease laboratory in Fort Collins, Colorado. The conferees

continue to support the rapid implementation of CDC's Buildings and Facilities Master Plan and are pleased with the progress made to date.

The conferees expect the CDC to utilize a portion of the funds provided for buildings and facilities to continue and expand security improvements to ensure critical information reliability for response to critical events, as well as to conduct increasingly varied public health missions.

The conference agreement includes bill language to allow the Centers for Disease Control and Prevention (CDC) to enter into a single contract or related contracts for the full scope of development and construction of facilities as proposed by the Senate. H.R. 246 contained no similar provision. The conference agreement also includes bill language proposed by the Senate to allow funds appropriated to the CDC to be used to enter into a long-term ground lease for construction on non-Federal land, in order to replace their laboratory in the Fort Collins, Colorado area. H.R. 246 included no similar language.

The conference agreement includes bill language to earmark \$183,763,000 for international HIV/AIDS, the same as proposed by the Senate and H.R. 246. The conference agreement deletes bill language proposed by the Senate earmarking \$40,000,000 of the amount provided for

international HIV/AIDS for the International Mother and Child HIV Prevention Initiative. The conferees are agreed, however, that \$40,000,000 of the amount provided for international HIV/AIDS is for this important initiative.

The conference agreement includes language in the bill designating that the following amounts shall be available under section 241 (Public Health Service Act evaluation set-aside) for the specified activities:

\$125,899,000	National Center for Health Statistics Surveys
\$ 14,000,000	National Immunization Surveys
\$ 28,600,000	Information Systems Standards Development and Architecture and Applications-based Research Used at Local Public Health Levels
\$ 41,900,000	Research Tools and Approaches within the National Occupational Research Agenda

H.R. 246 had proposed that \$46,982,000 be derived from section 241 for National Center for Health Statistics surveys.

The conference agreement modifies the placement of bill language proposed by the Senate exempting from any personnel ceiling applicable to the Agency, Service, or the Department of Health and Human Services both civilian and Commissioned Officers detailed to States, municipalities or

other organizations under authority of Section 214 of the Public Health Service Act for purposes related to homeland security during their period of detail or assignment. The agreement places the bill language within the Public Health and Social Services Emergency Fund account.

The conference agreement includes a modification to the proviso carried in prior appropriations acts prohibiting the use of funds available to the CDC to advocate or promote gun control, as proposed in H.R. 246. The Senate bill included a similar proviso. The conferees acknowledge that the purpose of this proviso is to prohibit Federal funds from being used to lobby for or against the passage of specific Federal, State or local legislation intended to advocate or promote gun control. The conferees understand that the CDC's responsibility in this area is primarily data collection and the dissemination of information and expect ~~that~~ research in this area to be objective and grants to be awarded through an impartial, scientific peer review process. The conferees instruct the CDC to provide a detailed report, within 90 days of enactment, on the steps the CDC has taken to ensure this restriction is being followed.

The conference agreement includes a modification to a proviso, proposed by the Senate, to raise the funding limit for grants made under section 1509 of the Public Health Service Act (WISEWOMAN screening

demonstrations). The agreement increases the limitation to \$12,500,000, instead of \$15,000,000 as proposed by the Senate. H.R. 246 maintained the limit at \$10,000,000. The conferees are agreed that the increase in the limitation is intended to permit, but not mandate, an increase in the awards under this authority to \$12,500,000 in fiscal year 2003.

Birth Defects

The conference agreement includes \$98,681,000 for birth defects, developmental disabilities, disability and health instead of \$97,691,000 as proposed by the Senate. H.R. 246 included \$94,655,000 for these activities.

Within the total, the following amounts are provided for the specified activities above the fiscal year 2003 request:

\$2,000,000 to expand State autism surveillance activities;

\$2,000,000 to expand surveillance and epidemiological efforts of Duchenne and Becker muscular dystrophy;

\$ 500,000 to activities related to Fetal Alcohol Syndrome;

\$ 842,000 to expand the newborn infant screening program; and

\$2,000,000 to support the establishment of a National Spina Bifida program.

In addition, \$3,800,000 is provided to continue and expand support for the Special Olympics Healthy Athletes Initiative begun last year.

The conferees encourage the CDC to continue its partnership with the Amputee Coalition of America (ACA) and its support of the Limb Loss Research and Statistics Program. The Committee is also supportive of the partnership that the ACA and CDC have forged with the uniformed services in an effort to ensure that members of our armed forces receive the highest quality of care in the event of an amputation.

Chronic Disease Prevention and Health Promotion

The conference agreement includes \$795,140,000 for chronic disease prevention and health promotion instead of \$745,600,000 as proposed by the Senate. H.R. 246 proposed \$773,928,000. Programs within this account are funded at the following levels:

Heart Disease and Stroke.....	\$ 43,244,000
Cancer Prevention and Control.....	\$290,645,000
Diabetes.....	\$ 63,756,000
Arthritis and Other Chronic Diseases.....	\$ 22,649,000
Tobacco.....	\$100,584,000
Nutrition/Physical Activity.....	\$ 34,372,000
Community Health Promotion.....	\$ 37,269,000
School Health.....	\$ 58,213,000
Safe Motherhood/Infant Health.....	\$ 54,315,000
Oral Health.....	\$ 11,787,000
Prevention Centers.....	\$ 27,006,000

National Campaign to Change Children's Health

Behaviors..... \$ 51,300,000

Within the amounts provided for Cancer Prevention and Control, no less than \$200,383,000 is for the Breast and Cervical Cancer Screening Program and \$1,000,000 is for the establishment of a national lupus patient registry. The conferees urge the CDC to work closely with the Lupus Foundation of America in the establishment of the registry.

Within the amounts available for Arthritis and Other Chronic Diseases, the agreement provides an increase over the request of \$850,000 for the expansion of State-based arthritis programs and collaborations with the relevant voluntary health organizations. In addition, an increase of \$1,000,000 over the request is provided to enhance epilepsy efforts, in partnership with a national non-profit organization that works on behalf of children and adults affected by seizures.

Within amounts provided for Community Health Promotion, \$6,903,000 is provided to support and expand the Behavioral Risk Factor Surveillance Systems, \$2,800,000 for continuing and expanding a model project that is testing and evaluating the efficacy of glaucoma screening using mobile units, \$1,900,000 is for a vision screening and education program as outlined in the Senate explanatory statement, and \$1,800,000 is for the Mind-Body Medical Institute in Boston, Massachusetts to continue

and expand practice-based assessments, identification, and study of promising and heavily-used mind/body practices.

The conferees encourage CDC to expand its public and professional awareness activities with respect to pulmonary hypertension and to report to the Committees on Appropriations within six months on the progress made in advancing this important initiative.

The conferees understand that the Iron Disorders Institute provides important educational material to the public and the medical community and encourages the CDC to establish a partnership with the Institute.

Environmental Health

The conference agreement includes \$184,025,000 for environmental health instead of \$189,489,000 as proposed by the Senate. H.R. 246 included \$174,917,000 for environmental health activities.

Within the total provided: \$37,763,000 is for the environmental health laboratory; \$38,863,000 is for environmental health activities (including \$2,200,000 to continue the physician education and public awareness program for primary immune deficiency disease as implemented by the Jeffrey Modell Foundation); \$37,127,000 is for asthma; \$42,272,000 is for childhood lead poisoning; and \$28,000,000 is for the health-tracking network.

The conferees recognize the extraordinary services of CDC's Environmental Health Laboratory, and have provided funds to expand the assessment of exposure of the U.S. population to environmental chemicals, to expand assistance to States, and provide more effective laboratory response to toxic emergencies.

The conferees are concerned about the health status of the residents of rural communities. The conferees understand that the CDC currently is developing a rural health plan to address the variety of rural public health issues related to environmental exposures. The conferees urge the CDC to continue to work closely with the State of Iowa Public Health Department in developing this plan.

Epidemic Services

The conference agreement includes \$78,001,000 for epidemic services and response as proposed by the Senate. H.R. 246 included the same amount for epidemic services.

HIV/AIDS, STD and TB Prevention

The conference agreement includes \$1,194,150,000 for HIV/AIDS, STD and TB prevention instead of \$1,183,532,000 as proposed by the Senate. H.R. 246 included \$1,175,000 for these activities.

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Included in this amount is \$887,961,000 for HIV/AIDS activities, of which \$183,763,000 is for global HIV/AIDS activities; \$169,675,000 for STD activities; and \$136,514,000 for TB activities. Within the funds provided for global HIV/AIDS, \$40,000,000 is for the International Mother and Child HIV Prevention Initiative.

Within the total for HIV/AIDS, \$104,000,000 is provided to continue CDC's support of activities that are targeted to address the growing HIV/AIDS epidemic and its disparate impact on communities of color, including African Americans, Latinos, Native Americans, Asian Americans, Native Hawaiians, and Pacific Islanders at not less than the fiscal year 2002 level. The ~~Committee expects~~ CDC to follow the report accompanying the Labor, HHS and Education and Related Agencies Appropriations Act, 2002 regarding the disbursement of these funds, including continuing support for the Directly Funded Minority Community Based Organization Program.

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Immunization

The conference agreement includes a discretionary program level total of \$654,751,000 for immunization, instead of \$652,895,000 as proposed by the Senate. H.R. 246 included \$634,601,000 for immunization activities. Within the total, \$14,000,000 is for national immunization surveys to be derived from section 241 evaluation set-aside funds. In addition, the

Vaccines for Children (VFC) program funded through the Medicaid program is expected to provide \$1,056,000,000 in vaccine purchases and distribution support in fiscal year 2003, for a total immunization program level of \$1,699,751,000.

Included in the amount provided is \$505,963,000 for the section 317 program, and \$148,788,000 for global immunization activities. Within the total available for global immunization, \$106,400,000 is for global polio eradication activities, and \$42,388,000 for the global measles program.

~~The conferees encourage CDC to increase section 317 grant support for infrastructure development and purchase of vaccines for the State of Alaska's universal immunization program.~~ ⁹

It has been brought to the conferees' attention that infrastructure costs of delivering vaccines to children in Alaska are substantially higher than in other areas of the country because of the many small, remote communities that must be served primarily by air. The conferees encourage CDC to increase section 317 grant support for infrastructure development and purchase of vaccines for the State of Alaska's universal immunization program.

Infectious Diseases

The conference agreement includes \$345,471,000 for infectious diseases instead of \$334,471,000 as proposed by the Senate. H.R. 246 included \$353,961,000 for infectious diseases.

Within the total provided, \$1,000,000 above the budget request is for a prevention program to control and reduce the ~~incidents~~ ^{incidence} of hepatitis C. This funding is to continue to develop State-based programs and demonstrations to learn the most feasible approach to integrating hepatitis C and B screening, counseling, and referral programs into existing HIV and STD State programs.

Within the total provided, \$8,000,000 above the request is to augment CDC's resources for supporting States in developing and implementing effective surveillance, prevention, and control of West Nile virus and support research on the biology of the disease.

Within the total provided, \$2,000,000 above the request is to expand and improve surveillance, research, and prevention activities on prion disease. The conferees intend that a significant portion of the increase be used to expand support for the National Prion Disease Pathology Surveillance Center to establish a national autopsy network for prion disease surveillance.

The conferees are pleased that the CDC is restoring funds for Chronic Fatigue Syndrome research and that these funds are being used in substantive areas. The conferees encourage CDC to continue the establishment of a national registry.

Injury Control

The conference agreement includes \$149,385,000 for injury control, as proposed by the Senate. H.R. 246 provided \$148,464,000 for injury control.

Within the total provided, \$3,000,000 is provided to extend implementation of the National Violent Death Reporting System. In addition, sufficient funds are included to continue support for all existing Injury Control Research Centers. The conferees also intend that \$1,000,000 of the funds provided above the request augment funding for the Traumatic Brain Injury prevention program.

Occupational Safety and Health

The conference agreement provides a program level of \$274,899,000 for occupational safety and health, the same as proposed by the Senate. H.R. 246 included \$275,161,000 for occupational safety and health. Included within the available funds is \$41,900,000 to carry out research tools and

approaches activities within the National Occupational Research Agenda (NORA) to be derived from section 241 evaluation set-aside funds.

Within the total provided, \$2,000,000 above the request is for the Education and Research Centers to expand research activities in support of implementation of NORA.

The conferees have provided sufficient funds for NIOSH to continue the farm health and safety initiative and to initiate an objective, science-based study on the exposure of industrial solvents on workers and whether those solvents have a long-term significant adverse neurological impact on the health of those workers.

The conferees support NIOSH's efforts in domestic terrorism preparedness, including work to protect emergency responders from biological and chemical terrorism exposures, as well as industrial accidents. The conferees urge NIOSH to fast-track its work to recognize the military affiliated laboratory expertise and certification and to certify military equipment for appropriate civilian use, particularly where any needed modifications are simple.

The conferees support continuation of the joint interagency initiative which involves the National Institute of Occupational Safety and Health, the Federal Aviation Administration, and the National Transportation Safety

Board. The conferees encourage NIOSH to continue to implement the Board's recommendations to improve aviation safety in Alaska.

Public Health Improvement

The conference agreement includes a total program level of \$153,848,000 for public health improvement instead of \$115,672,000 as proposed by the Senate. H.R. 246 included \$114,581,000 for public health improvement. Included within the available funds is \$28,600,000 to carry out information systems standards development and architecture and applications-based research used at local public health levels to be derived from section 241 evaluation set-aside funds.

Funds requested within public health improvement for development and implementation of a nationwide environmental health-tracking network have been provided for within the CDC's environmental health activities program.

The conferees include the following amounts for the following projects and activities in fiscal year 2003:

Adelphi University in Garden City, New York for its Breast Cancer Hotline	\$100,000
Alaska Department of Health and Social Services Obesity Prevention and Control program	\$400,000
Alivio Medical Center in Chicago, Illinois for its diabetes programs	\$150,000
Ambulatory Electronic Medical Record System (AEMRS) in Edina, Minnesota to improve overall medical error reduction	\$100,000
American Association of Physicians of Indian Origin for a study of cardiovascular disease and diabetes among persons of Asian Indian descent with emphasis on risk factors and effective interventions	\$500,000

American Trauma Society, Upper Marlboro, Md., for a program to provide medical professionals with the skills and strategies to guide families of the the trauma victim through the stages of care	\$100,000
American Vitiligo Research Foundation, for education and awareness programs for outreach	\$100,000
Asthma and Allergy Foundation of Alaska and the Alaska Lung Association to prevent lung diseases stemming from tobacco	\$500,000
Auditory-Verbal Mentoring Program, Birmingham, Alabama for auditory-verbal therapy	\$400,000
Bexar County Community Health Collaborative in San Antonio, Texas for its "Fit City/Fit Schools" program	\$150,000
Cal State Bakersfield Foundation, Bakersfield, California, for a Valley Fever vaccination project	\$750,000
Center for International Rehabilitation to implement and create Disability Rights Monitor	\$400,000
Children's Medical Center of Dallas, Texas for the Center for Infectious Diseases, Advanced Diagnostics, and Emerging Pathogens	\$500,000
Children's Medical Research Institute, Oklahoma City, Oklahoma, for a Type 2 diabetes research program	\$450,000
Citizens Against Toxic Exposure Health Clinic, Pensacola, Florida, to locate and assists individuals with health problems related to environmental toxins	\$300,000
City of Long Beach, California, for surveillance, laboratory, epidemiology and other services at its health department	\$355,000
Clear Corps, Pittsburgh, PA., to provide lead poisoning prevention services to families in the Pittsburgh area	\$75,000
Community Health Centers in Hawaii for a childhood rural asthma project	\$150,000
Community Services Planning Council, Sacramento, California, Shots for Tots KIDS immunization registry	\$283,000
Cooper Green Hospital Women's Cancer Screening and Prevention program, Birmingham, Alabama, to screen and detect cervical cancers among low income women	\$250,000
Delaware Health and Social Services, Division of Public Health, for the Delaware Electronic Reporting (DEERS)	\$500,000
Division of Health Sciences, East Tennessee State University, Johnson City, Tennessee, for the Appalachian Cancer demonstration project	\$200,000
Economic Opportunity Commission of San Luis Obispo County in San Luis Obispo, California for its senior health screening program	\$50,000
Elliot Health System, Manchester, New Hampshire	\$400,000
Epilepsy Foundation in Landover, Maryland for its "No Seizures, No Side Effects" campaign	\$350,000
Greater Cleveland SAFE KIDS Coalition's Reducing Child Pedestrian Injuries in Urban Areas Program to decrease the high rates of pedestrian injury for children	\$30,000
Greenburgh Central School District No. 7 in Greenburgh, New York for developing and implementing an action plan to improve physical fitness and nutrition and reduce obesity among middle school and high school students	\$303,000
Health and Human Services Department, City of Houston, Texas for its Online Infectious Disease/Bioterrorism Immediate Identification, Assessment and Alert demonstration project	\$375,000
Healthy Body Healthy Soul Jesse Trice Cancer Center Prevention Project to provide funding for cancer prevention, education and early detection initiatives	\$300,000

Hunter Health Clinic, Wichita, Kansas, for supplies	\$250,000
Huntsman Cancer Institute in Utah to develop a Genealogical Database in support of genetic disease research	\$500,000
Inova Regional Trauma Center, Falls Church, Virginia, for a community-based injury prevention center	\$300,000
Iowa Games to continue the Lighten Up Iowa program	\$100,000
Iowa Health Foundation for a pilot program on chronic disease management	\$500,000
Iowa State University, Center for Food Safety and Public Health, Ames, Iowa, for a public health research and education project	\$1,000,000
Jackson State University Institute of Epidemiology and Health Services Research to address urban and rural health problems in Mississippi	\$1,200,000
Jefferson Parish (Louisiana) Mosquito Control Board, Harvey, Louisiana, to combat infestation and spread of the West Nile virus	\$200,000
Kansas University Medical School and Family Community Medicine Program, Wichita, Kansas, for Diabetes management program	\$200,000
Kirkwood Community College in Cedar Rapids, Iowa for the National Mass Fatalities Institute	\$300,000
La Rabida Children's Hospital in Chicago, Illinois for diabetes programs for children and families	\$150,000
Lake Charles Memorial Hospital in Lake Charles, Louisiana for its Breast Health Center	\$550,000
Lawton & Rea Chiles Center for Healthy Mothers and Babies in Tampa, Florida, for training paraprofessionals in the health-care field	\$1,000,000
Marin County Department of Health and Human Services in San Rafael, California for research, analysis and health system improvements related to the incidence of breast cancer in the county	\$500,000
Medical Institute for Sexual Health	\$250,000
Michael E. DeBakey Institute for Comparative Cardiovascular Science and Biomedical Devices at Texas A&M University, College Station, Texas	\$800,000
Missouri Primary Care Association for chronic disease prevention and oral health outreach and education	\$150,000
National Bioinformatics Collaboration Center for early stage planning	\$50,000
Neighborhood Health Plan of Rhode Island in Providence, Rhode Island for a community-based asthma outreach and intervention program	\$250,000
Northern Arizona University to research and address critical security needs associated with biothreat agents and organisms	\$450,000
Nurses for Newborns Foundation in St. Louis, Missouri, for services to infants and children at risk for abuse or neglect	\$300,000
Onondaga County Health Department, Syracuse, New York, for Tuberculosis elimination project	\$125,000
Osteopathic Health System of Texas, Fort Worth, Texas, for study to determine the efficacy of Hyperbaric Oxygen for treatment of diseases	\$870,000
Partnership for Food Safety Education, Washington, D.C., to establish a national education clearinghouse	\$500,000
Rice University in Houston, Texas, for proteomics research	\$1,000,000
S.A.F.E., Inc., Wilkes-Barre, PA., (in affiliation with Geisinger's Center for Autism), to establish centers of excellence for the treatment of Autism	\$250,000

San Antonio Metropolitan Health District in San Antonio, Texas to expand a public health assessment of exposure to environmental contaminants at and near the former Kelly Air Force Base	\$350,000
San Luis Obispo County Public Health Agency in San Luis Obispo, California for diabetes prevention, screening and education	\$90,000
SIDS Resources, Inc. in Kirkwood, Missouri for an Urban Education Outreach Program and Infant Mortality Risk Reduction Program in rural Missouri	\$50,000
Sister to Sister - Everyone Has a Heart Foundation to increase womens' awareness of heart disease, Washington, D.C.	\$400,000
Sixteenth Street Community Health Center in Milwaukee, Wisconsin for a demonstration program focusing on asthma treatment in the bilingual community	\$250,000
Southeastern Center for Emerging Biologic Threats	\$600,000
Southern Methodist University for research regarding pharmaceutical antibiotic resistance	\$300,000
Southwestern Medical Center, Dallas, Texas, National Multiple Sclerosis Training Center at the University of Texas	\$500,000
St. Joseph Health Services in North Providence, Rhode Island for the "Pawtucket Smiles" children's oral health initiative	\$350,000
St. Joseph's Mercy Care Services in Atlanta, Georgia for their breast and cervical cancer screening and treatment program	\$350,000
St. Louis University Consortium Against Biological Agents in St. Louis, Missouri to expand and integrate the University's educational efforts in the basic science of the transmission, prevention and treatment of infectious diseases and the training of pub	\$1,000,000
St. Tammany Parish Mosquito Control Board, Slidell, Louisiana, for project to prevent and control the spread of West Nile virus	\$200,000
Sustainable Resources Center in Minneapolis, Minnesota for the Community Lead Education and Reduction Program (CLEARCorps)	\$125,000
Texas Tech University, Health Sciences Center, Lubbock, Texas, for Diabetes Prevention and Control project	\$500,000
The National Organization on Fetal Alcohol Syndrome, Washington, D.C., for Fetal Alcohol Syndrome project	\$1,000,000
Thomas Jefferson University Hospital in Philadelphia, Pennsylvania for a center for bioterrorism and disaster preparedness training	\$1,650,000
Tried Stone Economic Development Corporation in Detroit, Michigan for preventive health programs at the Imani Social Re-nurturing and Health Center	\$150,000
University of Alabama at Birmingham, Birmingham, Alabama, for a Rural Diabetes Glaucoma Initiative	\$400,000
University of Arizona Health Center to develop the use of DNA microarrays to detect contamination of foods and/or dietary supplements	\$100,000
University of Arizona to study NikkomycinZ (NikZ) as a treatment for Valley Fever	\$100,000
University of Findlay, Findlay, Ohio, for Terrorism Preparedness Center	\$1,500,000
University of Florida, Seniors Institute for Transportation and Communications, Gainesville, Florida, for Older Driver Assessment and Rehabilitation project	\$1,000,000
University of Georgia, College of Pharmacy, Center for Leadership in Education and Applied Research in Mass Destruction Defense (CLEARMADD), Athens, Georgia, to train health professionals to respond to chemical and biological attacks.	\$450,000

University of Louisville's Center for the Deterrence of Bioterrorism and Biowarfare to educate public health officials to detect and respond to biological attacks, Kentucky	\$1,200,000
University of Michigan Health System in Ann Arbor, Michigan for its clinical simulation center for education and training of first responders and medical and public health personnel	\$450,000
University of Missouri School of Journalism and the Sinclair School of Nursing Cancer Communication Research Center for evaluation and development of protocols and programs	\$200,000
University of Montana Center for Environmental Health Sciences, Missoula, Montana, to support research on the impact of environmental factors in causing or exacerbating human diseases	\$750,000
University of Northern Iowa Youth Fitness and Obesity Institute to study the effectiveness of movement programs on the health of preschool children	\$700,000
University of Rhode Island Cancer Prevention Research Center, in Kingston, Rhode Island for cancer related research and tobacco program	\$100,000
University of South Alabama for the Alabama Birth Defects Monitoring and Prevention Center	\$500,000
University of South Alabama for the Diabetic Lower Extremity Amputation Prevention Program	\$500,000
University of Texas M.D. Anderson Cancer Center in Houston, Texas for a comprehensive cancer control program to address the needs of minority and medically underserved populations	\$500,000
University of Vermont to implement an obesity research and community intervention program to evaluate effective remedies	\$100,000
Vanderbilt University Department of Pediatrics in Nashville, Tennessee, for the Nurses for Newborns program	\$250,000
Wausau Health Foundation in Wausau, Wisconsin to develop and test innovative approaches to increase screening for colorectal cancer	\$200,000
West Virginia University for the Center for Healthy Communities to implement a program to reduce obesity	\$1,000,000
Western Psychiatric Institute and Clinic, UPMC, Pittsburgh, PA. for weight management and obesity control	\$250,000
Woodhull Medical and Mental Health Center in Brooklyn, New York for a community-based asthma management program	\$375,000

NATIONAL INSTITUTES OF HEALTH

National Cancer Institute

The conference agreement includes \$4,622,394,000 for the National Cancer Institute instead of \$4,642,394,000 as proposed by the Senate and \$4,299,493,000 as proposed by H.R. 246.

The conferees note with concern the Lung Cancer Progress Review Group's August 2001 report, which concluded that the nation's health care system is poorly organized to deal with lung cancer and that a pervasive sense of "therapeutic nihilism" dominates the public and scientific discussion of this disease. The conferees urge NCI to consider implementing the group's recommendations, particularly regarding the creation of multi-institutional, multidisciplinary lung cancer consortia. The conferees request the NCI to submit a report on the group's recommendations by June 30, 2003.

National Heart, Lung and Blood Institute

The conference agreement includes \$2,812,011,000 for the National Heart, Lung and Blood Institute instead of \$2,820,011,000 as proposed by the Senate and \$2,698,391,000 as proposed by H.R. 246.

The conferees encourage NHLBI, in collaboration with the National Institute of Neurological Disorders and Stroke, to enhance its efforts to develop a diagnostic test for transmissible spongiform encephalopathies (TSE) that would be suitable for screening the blood supply. Currently,

there is no suitable method for identifying TSE-infected blood or humans infected with TSEs. Human TSEs, for which there are no known treatments, include Creutzfeld-Jakob disease and new variant Creutzfeldt-Jakob disease.

The conferees are aware of the impact of cystic fibrosis on children and adults and commend the voluntary associations that focus on combating this life-threatening genetic disease. The conferees urge the NIH to work with these organizations and outside researchers in supporting research related to the diagnosis and treatment of patients who are affected by this disease.

The conferees are interested in efforts to find a cure for Lymphangioleiomyomatosis (LAM), a progressive and often fatal lung disease of young women with no effective treatment. Accordingly, the conferees urge the NHLBI to explore opportunities for funding clinical treatment trials through both intramural and extramural means and to use all available mechanisms, as appropriate, including supporting state-of-the-science symposia and facilitating access to human tissues, to stimulate a broad range of clinical and basic LAM research.

National Institute of Dental and Craniofacial Research

The conference agreement includes \$374,067,000 for the National Institute of Dental and Craniofacial Research as proposed by the Senate instead of \$360,528,000 as proposed by H.R. 246.

National Institute of Diabetes and Digestive and Kidney Diseases

The conference agreement includes \$1,633,347,000 for the National Institute of Diabetes and Digestive and Kidney Diseases instead of \$1,637,347,000 as proposed by the Senate and \$1,532,394,000 as proposed by H.R. 246.

The conferees are concerned about the alarming growth in kidney disease and end stage renal disease and anticipated shortages of the professionals in nephrology that will be needed to handle these cases. NIDDK is encouraged to consider launching new training initiatives and workshops such as grant writing seminars to foster increased interest in this subspecialty.

National Institute of Neurological Disorders and Stroke

The conference agreement includes \$1,466,005,000 for the National Institute of Neurological Disorders and Stroke as proposed by the Senate instead of \$1,372,256,000 as proposed by H.R. 246.

The conferees encourage NINDS, in collaboration with NIAID, to expand support for controlled clinical trials to better understand the effect of

neutralizing antibodies on current therapies on multiple sclerosis, and to produce better clinical data on effective combination therapies using existing therapies that have been approved for MS and other conditions. The conferees further encourage NINDS to conduct a scientific workshop on the role of neutralizing antibodies in MS therapy and new approaches for treatment of MS with combination therapies of drugs approved for MS and other conditions.

National Institute of Allergy and Infectious Diseases

The conference agreement includes \$3,730,973,000 for the National Institute of Allergy and Infectious Diseases instead of \$3,727,473,000 as proposed by the Senate and \$2,674,213,000 as proposed by H.R. 246.

The conference agreement includes bill language permitting the transfer of \$100,000,000 to International Assistance Programs, Global Fund to Fight HIV/AIDS, Malaria, and Tuberculosis as proposed by the Senate. H.R. 246 included a general provision permitting the Director of NIH to transfer this amount to the Global Fund from funds appropriated to NIH.

The conference agreement includes bill language allocating up to \$375,000,000 for extramural facilities construction grants for research on biological and other agents. The Senate had proposed \$150,000,000 for these grants. H.R. 246 had no similar provision. The conferees intend to

provide NIAID with flexibility to determine the appropriate share of the Institute's funds directed to bioterrorism research versus infrastructure.

National Institute of General Medical Sciences

The conference agreement includes \$1,859,084,000 for the National Institute of General Medical Sciences instead of \$1,853,584,000 as proposed by the Senate and \$1,742,596,000 as proposed by H.R. 246.

National Institute of Child Health and Human Development

The conference agreement includes \$1,213,817,000 for the National Institute of Child Health and Human Development as proposed by the Senate instead of \$1,159,405,000 as proposed by H.R. 246.

The conferees recognize that the therapeutic potentials of adult and embryonic stem cells need to be studied in animal models. The conferees remain concerned about the absence of research dedicated to investigating stem cells in the most clinically relevant models. To maintain a position of scientific leadership in embryonic stem cell research, the conferees urge NICHD to support research using approved stem cell lines that investigate adult and embryonic stem cells in vitro and in nonhuman primates.

Congenital limb deficiency, vascular disease, childhood skeletal malignancy and trauma have resulted in over 1,500,000 persons in the U.S. experiencing limb loss. Technological advancements today offer

considerable opportunity for persons with limb loss to effectively resume active, productive lives. Standards of care for persons with limb loss have not been developed, however, nor have clinical outcomes research been conducted to determine appropriate access to advanced technology prosthetic devices and the importance of related physical rehabilitation and therapy to improve performance among persons who utilize prosthetic devices. The conferees encourage the Institute to support a prosthetic outcomes research consensus conference, with an emphasis on consumer input, to develop a research protocol to comprehensively address these concerns.

National Eye Institute

The conference agreement includes \$637,290,000 for the National Eye Institute instead of \$634,290,000 as proposed by the Senate and \$600,796,000 as proposed by H.R. 246.

Ocular albinism (OA) is a hereditary, blinding disease that causes terribly distorted vision in children. Victims, who are usually boys and receive the defective gene from their mothers, experience nystagmus, photophobia, lack of stereoscopic vision, strabismus, and other symptoms which deny these children normal vision. In recent years, great strides have been made in the search for improved diagnostic tools and treatments.

Recently, the OA1 gene, responsible for most cases of the disease, was identified, and a diagnostic screening test created to help women determine if they are at risk of passing the disease on to their children. As researchers move closer to understanding how this disease works, and developing potential treatments that could improve the vision of children with the condition, the conferees direct NEI to be prepared to report on advances in research on ocular albinism.

National Institute of Environmental Health Sciences

The conference agreement includes \$618,258,000 for the National Institute of Environmental Health Sciences instead of \$617,258,000 as proposed by the Senate and \$589,701,000 as proposed by H.R. 246.

The conferees commend NIEHS for its recent efforts to bolster research initiatives on the environmental influences of breast cancer. The conferees recognize the serious lack of research on the relationship between the environment and breast cancer, and believe that it is important for the Institute to support such research. The conferees urge the Institute to establish a group of breast cancer and environmental research advisers to make recommendations to the Director with regard to the support of the breast cancer and environmental research, and to include in the group representatives from the breast cancer community who have had breast

cancer. The conferees request an update at the fiscal year 2004 hearings on the progress in establishing an advisory group. The conferees encourage NIEHS to consider establishing centers to conduct multi-disciplinary and multi-institution research on environmental factors that may be related to breast cancer.

National Institute on Aging

The conference agreement includes \$1,000,099,000 for the National Institute on Aging as proposed by the Senate instead of \$939,608,000 as proposed by H.R. 246.

National Institute of Arthritis and Musculoskeletal and Skin Diseases

The conference agreement includes \$489,324,000 for the National Institute of Arthritis and Musculoskeletal and Skin Diseases as proposed by the Senate instead of \$474,392,000 as proposed by H.R. 246.

Vitiligo is an environmental and genetic auto-immune disease of unknown origin which affects about three to six million Americans. Almost 50 percent develop the disease in childhood, with the median age of onset at four years of age. In its most severe forms, patients have milky white patches covering widespread areas of the body due to the loss of pigment in these areas. Especially for young children, the physical pain caused by severe burns from the harmful effects of sunlight and the emotional pain

caused by people confusing vitiligo with an infectious disease diminishes the quality of a patient's life. There are no FDA-approved treatments for children. The conferees urge NIAMS to enhance research efforts through all available mechanisms, as appropriate, to identify the causes of this disease and develop pediatric treatment options for vitiligo.

National Institute on Deafness and Other Communication Disorders

The conference agreement includes \$372,805,000 for the National Institute on Deafness and Other Communication Disorders as proposed by the Senate instead of \$351,376,000 as proposed by H.R. 246.

National Institute of Nursing Research

The conference agreement includes \$131,438,000 for the National Institute of Nursing Research as proposed by the Senate instead of \$130,044,000 as proposed by H.R. 246.

National Institute on Alcohol Abuse and Alcoholism

The conference agreement includes \$418,773,000 for the National Institute on Alcohol Abuse and Alcoholism as proposed by the Senate instead of \$401,933,000 as proposed by H.R. 246.